

**COLLABORATION BETWEEN EDUCATION
AND SOCIAL WORK AUTHORITIES IN
ASSESSING CHILDREN'S SPECIAL
EDUCATIONAL NEEDS**

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DECLARATION

I declare that this thesis was composed by myself and is a record of my own work.

Ignatia (Nadia) Farmakopoulou

CONTENTS	PAGE
ABSTRACT	
AKNOWLEDGEMENTS	
INTRODUCTION	1
CHAPTER ONE	
POLICY FRAMEWORK FOR SPECIAL EDUCATIONAL NEEDS AND INTER-AGENCY COLLABORATION	
Introduction	6
SECTION A: POLICY FRAMEWORK FOR SPECIAL EDUCATIONAL NEEDS	
From the 1944 and 1945 Education Acts to the Warnock Report	6
From the Warnock Report to the 1981 Education Acts	8
Anomalies of the term 'Special Educational Needs'	18
SECTION B: POLICY FRAMEWORK FOR INTER-AGENCY COLLABORATION	
Inter-agency collaboration in assessing children's special educational needs	21
Summary	27
CHAPTER TWO	
LITERATURE REVIEW AND THEORETICAL FRAMEWORK	
Introduction	28
SECTION A: LITERATURE REVIEW	
Literature on inter-professional and inter-agency collaboration	28
A conceptual framework for special educational needs: An eclectic approach	35
SECTION B: THEORETICAL FRAMEWORK FOR INTER-AGENCY COLLABORATION	
Theoritising inter-agency collaboration: An intergrated approach	43
Summary	49
CHAPTER THREE	
METHODOLOGICAL CONSIDERATIONS	
Introduction	51
Translating the aims of the study into research questions and methodology	51

Rationale for using a multi-method research strategy	53
Rationale for the choice of the type of survey	55
Rationale for using case studies	58
Selection of data collection techniques for the case studies	63
Design of the questionnaire in the postal survey	72
Pilot study of the postal survey	74
Negotiating access	75
Sending out the postal survey and strategy adopted for the non-respondents	75
Criteria for selecting the sites of the case study authorities	76
Access to the three selected case study authorities, responses and discussions with managerial staff about the practicalities of the project	79
Criteria for the selection of the case study children	80
Sampling of the case study authorities	80
Construction of the interview design for the semi-structured interviews, pilot study and interview procedure	82
Data analysis for the semi-structured interviews	84
Ethical considerations	86
Summary	87

CHAPTER FOUR

PATTERNS OF COLLABORATION IN SCOTLAND

Introduction	88
Changes to the local collaborative arrangements due to the Children (Scotland) Act 1995	89
Frequency of collaboration between education and social work staff	92
Criteria used in deciding whether to collaborate with the other department's staff	94
Types of special educational needs most often result in contact with the other department's staff	95
Range of professionals involved and identification of the key players	98
Use of local multi-disciplinary teams	99
Identification of the participants of the multi-disciplinary meetings	101
Importance attached to inter-agency collaboration	102
Satisfaction with the collaborative arrangements	103

Summary	104
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CHAPTER FIVE

EARLY YEARS PROVISION

Introduction	106
SECTION A: POLICY ON PRE-SCHOOL PROVISION	
Historical development of early years provision	106
Current provision for pre-school children	110
Costs and benefits of pre-five provision	115
Provision for children with special special educational needs	116
Co-ordination of the early years provision	117
SECTION B: PROFILE OF EARLY YEARS PROVISION IN THE THREE CASE STUDY AUTHORITIES	
Authority A	120
Authority B	122
Authority C	129
Comparison of the early years services	130
Summary	132

CHAPTER SIX

PATTERNS OF COLLABORATION: RESPONDENTS' EXPERIENCE AND PERCEPTIONS AND EVALUATION OF THE COLLABORATIVE ARRANGEMENTS

Introduction	133
SECTION A: DESCRIPTION OF THE COLLABORATIVE ARRANGEMENTS AND RESPONDENTS' EXPERIENCES AND PERCEPTIONS	
Description of the formal and informal arrangements	134
Respondents' views about the patterns of collaboration	143
SECTION B: EVALUATION OF COLLABORATIVE ARRANGEMENTS	
Informal, formal or a combination of both types of teams ?	153
Assessment of the formal MDTs	154
Summary	167

CHAPTER SEVEN	INTER-AGENCY COLLABORATION: RESPONDENTS' EXPERIENCE AND PERCEPTIONS AND INTER- ORGANISATIONAL ANALYSIS	
	Introduction	170
	SECTION A: RESPONDENTS' EXPERIENCES AND PERCEPTIONS OF INTER-PROFESSIONAL AND INTER-AGENCY COLLABORATION	
	The need for and value of inter-agency collaboration	171
	Ease of collaboration	177
	Professional roles	181
	Frequency and duration of the collaborative activity	199
	Information sharing issues	208
	Communication and relationship issues	213
	Summary of the first section	231
	SECTION B: INTER-ORGANISATIONAL ANALYSIS	
	Interpretation of the data using the main concepts of the social exchange, resource dependency and political economy models	233
	Summary of second section	241
CHAPTER EIGHT	CENTRAL ISSUES IN THE ASSESSMENT PROCESS	
	Introduction	243
	Parental satisfaction with the assessment process and the outcomes	243
	Functions of the assessment process : Who benefits?	245
	Decision-making as a social process	260
	Summary	268
CHAPTER NINE	EXPLORATION OF FACTORS THAT INFLUENCE INTER-PROFESSIONAL AND INTER-AGENCY COLLABORATION	
	Introduction	270
	SECTION A: ENVIRONMENTAL FACTORS THAT INFLUENCE THE COLLABORATION BETWEEN EDUCATION AND SOCIAL WORK STAFF	
	Economic, political and social factors	271
	Implementation	274
	Resources	278

**SECTION B: INTRA-ORGANISATIONAL
FACTORS THAT INFLUENCE
COLLABORATION BETWEEN EDUCATION
AND SOCIAL WORK STAFF**

The comparative properties approach 280

**SECTION C: IMPLICATIONS FOR POLICY,
PRACTICE, EDUCATION AND RESEARCH**

Implications for policy 292

Implications for practice 293

Implications for education 298

Implications for further research 300

Summary 301

CHAPTER TEN

Have the aims of the study been addressed ? 303

Has the integrated theoretical approach used in the
study been proven useful ? 309

What is the overall conclusion ? 311

BIBLIOGRAPHY 316

APPENDIX 1

Chapter 1

Appendix 1.1. The steps in identifying and assessing
a child's special educational needs in the pre-school
period

Appendix 1.2. The steps in identifying and assessing
pupils' special educational needs at the primary
stage

Appendix 1.3. The ten distinctive features of
effective provision for special educational needs

APPENDIX 2

Chapter 3

Appendix 2.1. Questionnaire to the education and
social work departments
Appendix 2.2. Letter to the
Association of the Directors of education in
Scotland and to the Association of the Directors of
social work in Scotland

Appendix 2.3. Covering letter to the Directors of all
the education and social work departments in
Scotland

Appendix 2.4. Letter to the Directors of the three
selected case-study education and social work
authorities

Appendix 2.5 Summary of the data on the case
study children

Appendix 2.6. Interview design for the semi-structured interviews with education and social work staff (general interview and checklist)

Appendix 2.7. Interview design for the case study children

Appendix 2.8. Interview design for the semi-structured interviews with health and voluntary organisation representatives

Appendix 2.9. Interview design for the semi-structured interviews with parents of the case study children

Appendix 2.10. Statement about anonymity and confidentiality

APPENDIX 3

Chapter 9

Appendix 3.1. Broskowski et al's (1982) table of intraorganisational and environmental conditions that inhibit or facilitate interorganisational relationships

Appendix 3.2. Reproduction of Broskowski et al's (1982) table of intraorganisational and environmental conditions that inhibit or facilitate interorganisational relationships

Appendix 3.3. Dyson's et al (1998) analytical framework

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ABSTRACT

This thesis comprises an exploratory study of inter-professional and inter-agency collaboration between Scottish education and social work authorities in assessing the special educational needs of children under 5. It involves an investigation of collaborative arrangements as well as an examination of the experiences and perceptions of a number of key players involved in the process of assessment. The study is set against a background in which a series of policies advocate, and in some cases require, inter-agency collaboration, while reports from the field demonstrate that such collaboration is limited in extent, poor in quality and difficult to effect. The study aimed to gather data from professionals involved in the assessment process as well as from the parents of children who underwent assessment, and to analyse the findings in terms of the main conceptual models for inter-organisational collaboration.

A multi-method approach was used in the study, where quantitative data collected in the first stage through a postal survey of all social work and education authorities in Scotland and qualitative data gathered in the second phase via the use of case studies which used a range of research methods. Semi-structured interviews with education, social work staff, parents of case study children as well as with a limited number of health and voluntary organisation representatives were carried out in three case study authorities. The questions explored advantages and disadvantages of inter-agency collaboration and different collaborative arrangements, factors influencing such collaboration and key issues in the assessment process.

The postal survey and, subsequently, the detailed case studies revealed a number of interesting similarities and differences in the nature, quality and extent of collaboration between education and social work authorities. Variations in the services offered to children under five were also identified in the case-study authorities as well as a number of internal and external factors that influenced such collaboration.

The findings support previous studies concerning the frequency and quality of inter-agency collaboration, since collaboration continues to be limited in extent and poor in quality. The study concludes that effective inter-agency collaboration entails the recognition of the inter-related inhibitory environmental and intra-organisational factors, a consistent effort and a strong will to minimise, if not, eliminate them.

INTRODUCTION

Inter-professional and inter-agency collaboration have long been seen as means to a variety of ends, such as ensuring that the totality of people's needs are both recognised and met, achieving economies in the use of resources and bridging the gap between and within statutory and voluntary agencies. One good reason for collaboration between education, health and social work departments is the *inter-relatedness of needs*. In the case of the assessment of children with special educational needs, the paediatrician's role is to assess the health needs of these children, the social work staff's role is to assess the social care needs of both the children and their families and the educational psychologist's role is to assess the educational needs of these children and to co-ordinate the assessment and recording process. Collaboration between these professionals encourages therefore a more holistic approach to client needs which, in turn, promotes *more effective service provision*. There are also considerations of *cost-efficiency*. Collaboration in the planning, provision and delivery of services is of great importance if duplication of work is to be avoided and existing equipment, buildings and other resources are to be used effectively and efficiently.

Calls for inter-professional and inter-agency collaboration in this field have been a regular feature of government policy since the publication of the Warnock Report in 1978. In practice, though, inter-agency collaboration has often been problematic, both at the level of planning and in the delivery of services.

This study included two stages. The first stage of the research aimed at a *description* of current patterns of collaboration in all Scottish education and social work authorities. It showed how many education and social work authorities had already established or intended to establish collaborative procedures in response to the legislative framework (Children (Scotland) Act 1995) and what were the most common forms of such collaboration. The second stage of the research aimed at the *exploration* of similarities and differences between these authorities, in relation to their under 5 services, in patterns of collaboration and in the frequency and quality of collaborative relationships. It also aimed at the *evaluation* of different collaborative arrangements and relationships between educational psychologists and social work staff. In addition, this phase of the study aimed at the *investigation* of the main issues involved in the assessment of special educational needs and at an *examination* of the factors which influence inter-professional and inter-agency collaboration. The ultimate aims of the study were, to learn from the experiences and practices of three selected case-study authorities and to advance the thinking about inter-professional and inter-agency relations, in the hope that this will lead to improvements in the planning and delivery of services for children with special educational needs and their families.

Although this study focuses on inter-agency collaboration between education and social work authorities in assessing children's special educational needs, and some of the conclusions are clearly context specific, others are of a more general nature and, as such, apply to other tasks and to collaboration between other professionals and other agencies.

Chapter 1 begins by outlining the policy framework for the assessment of special educational needs and for inter-agency collaboration while chapter 2 provides an overview of the associated terms and relevant research studies. This chapter also sets out a conceptual framework for understanding special educational needs and inter-agency collaboration. Chapter 3 specifies the research questions, discusses the research design and considers methodological issues raised by the research while chapter 4 describes the current patterns of collaboration between education and social work authorities as revealed by a postal survey of all education and social work authorities in Scotland. The analysis of fieldwork in three case-study authorities is divided into five chapters. Chapter 5 begins with an examination of the central issues in pre-school provision and proceeds with a description and comparison of services in the three authorities. Chapter 6 explores the participants' experiences and perceptions of the collaborative arrangements between staff in the education and social work departments, investigates why and how different patterns of collaboration have been developed, and evaluates these arrangements. The first section of chapter 7 moves to an examination of the respondents' experiences and perceptions of inter-agency collaboration. This includes an investigation of the advantages and disadvantages of collaborative arrangements, a description of the roles of education and social work staff, and an exploration of the extent and quality of collaborative relationships. In the second section of this chapter, the informants' responses are examined in relation to an integrated conceptual framework for inter-agency collaboration. Thus, chapters 6 and 7, represent a progression from what participants reported was happening to what the researcher concluded was happening.

Chapter 8 concentrates on key issues concerning special educational needs' assessments and its outcomes while chapter 9 explores the environmental and intra-organisational factors that influence inter-agency collaboration in this field as well as on their implications for policy, practice, education and research. Chapter 10 concludes the thesis with a look backwards to the main findings and forwards to what can be learned from the study and about how inter-agency collaboration can be assured, maintained, and enhanced.

Before turning to the first chapter it may be helpful to refer to the researcher's background and interest in this particular area as well as to the information and language used in the study.

I had always been interested in issues related to children with disabilities since a close friend of my family in Greece had a child with learning difficulties. However, my interest grew when I came to Scotland on an Erasmus exchange programme and I undertook a six-month placement as a social work student in a primary school for severely disabled children. After graduating in 1995, I took an MA in Social Work Studies at the University of Kent and my dissertation, entitled 'Moving from disabling to empowering children with disabilities and their families : the role of the social worker' concentrated on the empowerment of disabled children and their families in the assessment of special educational needs. Thus, in a way, this Ph.D. thesis grew out of my MA dissertation. The reason for choosing to undertake post-graduate research in Scotland, rather than in England, was that I was interested in exploring how education and social work

departments would have to alter their existing collaborative practices as a result of Children (Scotland) Act 1995.

For reasons of simplicity and clarity, a number of abbreviations are used throughout the thesis and these are listed in Appendix 5. As far as anonymity concerned, as explained more fully in chapter 3, the names of the participants and the case-study authorities have been changed. With regard to the latter, the names of the three case-study authorities have been replaced with the letters A, B and C and the authorities are referred as authority A, authority B and authority C.

CHAPTER 1

CHAPTER 1

POLICY FRAMEWORK FOR SPECIAL EDUCATIONAL NEEDS ASSESSMENTS AND INTER-AGENCY COLLABORATION

Introduction

This chapter concentrates on the policy framework for special educational needs and inter-agency collaboration and is divided into two sections. In the first section the policy context regarding special educational needs assessments is outlined whereas in the second section the policy framework concerning inter-agency collaboration in this field is described.

SECTION A: POLICY FRAMEWORK FOR SPECIAL EDUCATIONAL NEEDS

From the 1944 and the 1945 Education Acts to the Warnock Report

The 1944 Education Act in England and the 1945 Act in Scotland were produced in the anticipation that after the end of the war there would be a need to extend the educational opportunities of all children. The Acts placed special education for disabled pupils firmly within the general duty of education authorities to provide efficient primary and secondary education. They envisaged that for the first time less seriously handicapped children might be catered for in mainstream schools (Part II, sections 33-34 in the English Act and Part II, sections 40-42 in the Scottish Act). However, this anticipation

turned out to be unrealistic, as the constraints of finance and the limited number of qualified personnel had the consequence that only the more severely handicapped children were assessed. Moreover, the large class sizes in mainstream schools made it extremely difficult to provide a positive integration policy. Both Acts referred to those pupils requiring special education as having 'disabilities of body or mind' and, therefore, responsibility for assessment laid with school medical officers. As handicap was seen primarily as a medical problem, disabled children were referred to special schools and this clearly indicated that special education was focused on problems 'within the child' (models of special educational needs are further discussed in chapter 2). This view of special needs is confirmed by the terminology used in the 1945 Handicapped Pupils Regulations for England concerning the following eleven categories of handicap: deaf, partially deaf, blind, partially sighted, physically handicapped, delicate, diabetic, epileptic, educationally subnormal, maladjusted and children with speech deficits. In order to be allocated provision, pupils had to be diagnosed by doctors in the 'school health service' as having one of the above mentioned categories.

The demands for assessment, the rise of the role of psychological testing and recommendations from the Ministry of Education's chief medical officer in 1958 that head teachers and educational psychologists should contribute to school placement decisions, led to an increased demand for educational psychologists. A consensus gradually emerged that special education should be perceived primarily as an educational issue, though medical advice would clearly continue to play an important role, especially

where medical factors have implications for a child's educational needs (Galloway, 1985; Adams, 1986; Weddell, 1990 and Riddell & Brown, 1994).

In the 1960s and 1970s there was increasing unease about the growth of special education and the allocation of scarce resources. More specifically, the fundamental philosophy of establishing special schools for certain groups of children was questioned, and it was generally recognised to be wrong, as a matter of principle, to segregate children from their ordinary peers. The categories of handicap were also seen to be rather unhelpful in practice, since a medical condition does not necessarily have educational implications (Adams, 1986; Stow & Selfe, 1989). As a response to this criticism, in 1973 Margaret Thatcher, as Secretary of State for Education and Science, announced the establishment of a new national committee under the chairmanship of Mary Warnock to review educational provision in England, Scotland and Wales for children and young handicapped persons with disabilities of body or mind and make recommendations, taking into consideration their medical needs, the necessary arrangements to prepare them for employment and cost-effectiveness issues. The committee completed its report in March which was published in May 1978.

From the Warnock Report to the 1981 Education Acts

The Committee made 224 recommendations and their report was very influential in restructuring thinking and practice about children with special educational difficulties. Four main recommendations are reviewed below.

Categorisation and the concept of special need

The Committee stated that there were no grounds for postulating a clear distinction between those children who were handicapped and those who were not. A handicap resulting from a disability had to be seen as inter-related to the constraints of the environment, the needs and aspirations of the individual child and the demands of society. The categories of handicap did not have any educational significance, since no direct implications about a child's educational needs could be inferred from them. In addition, children's needs were usually more or less complex, and so seldom fitted neatly into a single category. For these reasons, the Committee recommended the abolition of the categorisation of children and proposed the use of the alternative concept of 'special educational needs'. The Committee affirmed that these needs might take a variety of forms, and occur across a range of severity. The Committee put forward the notion of a continuum of needs and curricular needs were emphasised.

Redefinition of special education

The Warnock Committee defined special education more broadly than it had been defined in the past. On the basis of a number of epidemiological studies and reports, they concluded that about one child in five is likely, at some time in his/her school life, to require some form of special educational provision. The Committee also proposed a more flexible system of provision and made clear that special education should no longer be synonymous with special schooling. Moreover, the Committee proposed that the focus

should no longer be on the 2 per cent attending special schools, but, instead on the 20 per cent who need special educational resources at some time in their schooling.

Integration

By stating that the aims of education were the same for all children, and that the concept of handicap was relative, the Committee promoted a positive integration policy towards children with special educational needs. One of the key principles of the Warnock Report was, therefore, the maximum integration of all children with special educational needs into mainstream schools and community life. The Committee stressed that various degrees and forms of integration were possible - locational, social and functional, and academic. However, the Committee recommended that special schools would still be required for those children whose integration was impractical.

Early identification and assessment

The Committee also emphasised the importance of the early recognition of, and help for, children's special educational needs. In this connection, and also generally, the Committee recommended a closer partnership between parents and the school, since parents are acknowledged to be the prime educators of their children. Parent's rights to participate in decisions about their children's education were strongly emphasised. This view was reflected in the Committee's recommendation that parents should have access to relevant information about their children's needs as well as information about what special educational provision was available and how they could obtain it. It was also

suggested that parents should be able to request an assessment and the education authority should have a duty to provide one, if it was felt to be in the child's best interests. A five-stage model of assessment was proposed, where the first three stages were school-based and the final two referred to specialist assessment from professionals outside the school.

Although many of the Committee's recommendations were accepted, given the fact that the economic climate was not favourable, no additional resources were offered. As Weddell (1990) points out Britain was the only developed country to attempt special educational reform without allocating any additional funds to put it into practice. Although the Warnock Report was generally welcomed, it was criticised by some people, on the ground that its logic was flawed and the proposed new definitions were too vague and imprecise; it focused only on special educational needs and did not deal with the underlying social causes; and, in a period of rapidly rising unemployment especially for the young and unqualified, it was wrong to assume that meaningful and satisfying work would be an attainable goal for the vast majority of young people with special educational needs. Some commentators also felt that the Warnock Committee did not go far enough in achieving a significant shift in the balance of power between parents and professionals. As Kirp (1982) noted, a major weakness lay in its uncritical acceptance of the benign discretion of professionals as the guiding principle in policy. This was clearly reflected in the membership of the committee which was drawn almost entirely from professionals who were involved in special education. The only non-specialist was its chairman - an Oxford philosopher don. Only one out of the 26 members of the

Committee was the parent of a handicapped child. Furthermore, no non white person served on the Committee and there was no lawyer or handicapped young person on it.

Approximately three and a half years after the publication of the Warnock Report the Bill eventually became law, namely the Education Act 1981 (for England and Wales) and the Education (Scotland) Act 1981.

Both north and south of the border the legislation abolished the old statutory categories of handicap, established special educational needs as a central concept, and with it the linked concept of learning difficulties, and provided for assessment procedures and the drawing up of an official document, known as a 'Statement' in England and Wales and a 'Record of Needs' in Scotland, stating the nature of a child's special educational needs and the measures proposed by the education authority to meet these needs. The definitions of special needs used in the English and the Scottish legislation were slightly different, but both defined the concept with regard to the performance of other children of the same age and the level of available resources. However, the two main differences between the Acts were that the Scottish legislation included measures which allowed parents a degree of choice about their children's school while the English legislation did not and that the Scottish legislation did not make a commitment to the integration of children with special educational needs whereas the English legislation did so (Riddell and Brown, 1994).

As the subject of this study is collaboration between education and social work authorities in Scotland, in the assessment of children's special educational needs, the remainder of this section will make reference only to the relevant Scottish legislation and

special emphasis will be placed on those sections which refer to the identification, assessment and recording of children's needs.

According to the Education (Scotland) Act 1981 a child has a 'learning difficulty' if he has significantly greater difficulty in learning than the majority of children or if he suffers from a disability which either prevents or hinders him from making use of educational facilities of a kind generally provided for children of his age (section 1 (5) (d)).

In relation to children and young persons of school age, provision for special educational needs means educational provision which is additional to or otherwise different from that generally made for those pupils of the same age in schools managed by the education authority for the area concerned. It is important to clarify that provision for special educational needs may be made in either mainstream or special schools and for children with or without a record of needs.

Identification and assessment of children and young persons with special educational needs

According to the 1981 Act, the identification and assessment of special educational needs is not an end in itself. Its aim is to provide a better understanding of a child's or young person's learning difficulties and its purpose is to offer a basis for the adoption of suitable forms of education for that pupil and, thereafter, to decide how best to monitor his or her progress.

It is the duty of education authorities to put in place strategies for identifying those children who have special educational needs. For those strategies to be effective, they

should involve many different persons and organisations and come into effect early in a child's life. Education authorities have, therefore, a statutory duty under section 60 (1) of the 1981 Act to disseminate information in their area as to the importance of the early discovery of special educational needs as well as the opportunity for assessment under the Act. Every person who regularly comes into contact with a child such as parents, doctors, therapists, teachers and social workers, may have a crucial contribution to make and education authorities should, therefore, make efforts to establish formal or informal contacts with such people and try to improve awareness of the need to alert the authority to any concerns they may have in connection with that child. It is also crucial that each authority establishes a strategy for disseminating information about the arrangements for assessment.

Under section 61(1) of the 1981 Act where an education authority intends to assess a child, it must serve a formal notice on the parents inviting them to submit their child for assessment. This notice should explain the purpose of the assessment; specify the time and place at which it is proposed to carry out any examination(s) of the child; inform the parents of their right to be present at any medical examination; refer to the name of the education authority officer from whom advice and further information is available; and invite the parent to submit written views usually within 21 days of the day of the notice. Under section 61 (6) of the 1981 Act, a parent may also ask an education authority to make an assessment of his/her child to ascertain whether the child should have a Record of Needs, and the education authority must do so unless in its opinion the request is unreasonable. Parents and young persons have the right of appeal to the Secretary of

State if they disagree with the education authority's decision to open or not to open a Record of Needs and they can also appeal to the Educational Appeal Committee over choice of school (section 63 (1) (a)). The 1981 Act (section 61 (7)) stipulates that children and young persons should be given a period of 14 days within which to respond giving their views about their special educational needs and the measures required to meet them.

As a matter of good practice, authorities should aim to co-ordinate the elements of assessment in order to minimise disruption to education and to avoid stress to the child or young person during the assessment period. Authorities are also expected to conclude the assessment and recording process as soon as possible. Under section 62 (2) of the Act this period should not exceed 6 months.

Where the education authority believes a child or young person has pronounced, specific or complex educational needs which will require continuing review, the Act section 61(1) lays down statutory procedures for observation and assessment. This process of observation and assessment must include educational, psychological and medical assessments and in some cases advice from social work authorities. According to the Act, whether or not a child has a Record of Needs opened for him/her, he/she will have a better chance of receiving the quality of education he/she requires when his/her needs are assessed thoroughly.

As with the Warnock Report, the 1981 Education Acts have been severely criticised on the grounds that the definitions they contain and the resulting guidelines are too vague and imprecise and have led to the emergence of significant inconsistencies over

implementation (the criticism of the definitions is discussed below). In addition, many questions have been raised about the extent to which the Education Act introduced a radical change of policy or merely 'more of the same' and for this reason research was commissioned by the Department of Education and Science in England and Wales (Goacher et al, 1988) and the Scottish Office Education Department (Thomson et al, 1989). As shown in chapter 2, several inconsistencies in the implementation of the Education Acts were found in these studies as well as wide variations between authorities.

Over the last decade the Scottish Office has developed a framework of guidance concentrating on the assessment, recording and provision for children and young persons with special educational needs. The framework consists of the following four interrelated policy documents.

The Scottish Office Report (1994), 'Effective provision for special educational needs', recommends a nine step approach to identifying and assessing pre-school children's special educational needs (see Appendix 1.1.) and similarly a eight step approach to identifying and assessing school age children's special educational needs (see Appendix 1.2). Ten distinctive features of effective provision are also identified in this report, which are derived from an analysis of Inspectorate reports on the provision for special educational needs (see Appendix 1.3).

Much of the Scottish Office Report, (1996a) 'Children and young persons with special educational needs: assessment and recording', is given over to describing the processes and practices that should be followed in relation to the assessment of children and young

persons who might require a Record of Needs, and the opening, review and maintenance of the records. However, as explained in the objectives of this circular, the principles, such as early identification of special educational needs and parental involvement apply equally well to all children and young people with special educational needs and their families.

In the Scottish Office Report (1993b), 'A parents' guide to special educational needs', the parents' rights (e.g. right to appeal, when, where and how) and responsibilities in the special educational needs processes are explained, and ways of getting involved are described.

The Scottish Office Report (1999) 'Professional practice in meeting special educational needs: a manual of good practice', refers to the Children (Scotland) Act 1995 and states that this Act is seen by the Government as fulfilling its obligations to implement the UN Convention on the Rights of the Child and its obligations under the European Convention on Human Rights. In the manual it is recommended that each local authority should have a policy statement which outlines a commitment to meet the authority's statutory duties in relation to the education and welfare of all children/young persons and which gives due regard, without discrimination, to their disability, gender, religious persuasion, racial origin, cultural and linguistic background. The policy statement should also take account of the statutory rights of children and young persons as well those of parents and clarify ways of ensuring that children, young persons and parents are listened to and provided with the support of advocacy services where appropriate. In addition, the statement should outline a commitment to promote the inclusion of children and young persons

with special educational needs. Structured opportunities for actively involving them in the policy-making should also be provided. Lastly, and perhaps most importantly, the policies and procedures should be implemented consistently and evaluated regularly in collaboration with children/young persons, parents and voluntary organisations.

Anomalies in the term 'Special Educational Needs'

As noted earlier, one of the major criticisms of the 1981 Education Acts has been the introduction of vague and imprecise definitions. Although all definitions received some criticisms, the concept of special educational needs has always been what Goacher et al, (1988) call 'the heart of the matter'. As Norwich notes, problems with this definition were associated with many practical difficulties:

'... difficulties in communication between professionals, parents and education officers, in the sharing of a compatible understanding about special provision, in the recording of special educational needs and provision and in the delays and uncertainties of the statutory assessment procedure' (1990:35).

Each of the three words in the term special educational needs raises its own questions. 'Special' is defined in the Oxford dictionary as 'of a peculiar or restricted kind'. While that may be true of children with profound, severe or complex difficulties, it is obviously not true of all children who have special educational needs. Warnock extended the term to include the large number of low achieving and mainly working class pupils. Far from being special, many professionals argue that these children's needs are absolutely normal.

There is certainly no sense in which children's needs are 'restricted'; indeed, if something is restricted, it is the curriculum and not the pupils' needs (Evans, 1989; Evans and Varma, 1990).

Although the word 'educational' seems less contentious, it also has its own problems. Galloway et al (1994) claim that the word 'educational' frequently conflates educational needs with other needs which may be more important for the child's educational progress. If, for example, a child is living in stressful circumstances at home, this may affect his/her motivation, behaviour and work at school. Undeniably, there will be implications for the school, but these may concern the need for stability or a supportive relationship with a teacher. To say, however, in this case that the child has special educational needs may be misleading. With regard to the word 'needs', the concept of need implies that something is wanted. When we talk about someone having a need for something we are implicitly making a value judgement. We may mean that the individual ought to have the thing in question. Alternatively, we may mean the person thinks he ought to have it. When we say a child has special educational needs we imply that we want something for, or on behalf of, the child. Children, however, do not usually say that they have special educational needs, but, educational psychologists, teachers and/or parents make this claim on the child's behalf. In doing so, they may be making a value judgement about the help which they believe the child ought to be receiving or about the progress the pupil ought to be making. However, in saying that a child has special educational needs, teachers may be implying that they want a less disruptive life, or that they want other children's education to benefit from the child's removal. Thus, the

‘needs’ implied in the concept of special educational needs may not refer to the child in question (these issues are further explored in chapter 8) (Galloway 1985; Galloway et al, 1994).

Confusion over the term ‘special educational needs’ has a parallel in similar confusion over criteria for its use. As Galloway et al (1994) point out, one problem with the term special educational needs concerns the criteria for using it or, more often, for not using it’ (1994:14). Similarly, Adams (1986) claims that one of the more problematic areas in the Education Acts is deciding which pupils have, or might have, special educational needs at a level which requires the education authority to provide provision for them.

According to Norwich (1990) a working resolution is to be found in the use of two levels of criteria,: ‘... broad guidelines and criteria at a national level which are specific enough to facilitate the setting of even more specific procedures and criteria at LEA level’ (Ibid: 47). Norwich states that it is of great importance that these specifications are not so constraining as to prevent local authorities from developing their own versions of criteria and thresholds to meet local conditions. Local authorities should be expected to publish their own criteria, review and update them with regard to changing circumstances. Similarly, government guidelines will need to be reviewed and updated in response to changing local authorities and school provisions. It is an essential part of this scheme that the primary emphasis should be on individual needs, which are assessed in terms of a child’s functioning in context. Moreover, local criteria, based on national ones, should be used in the general summary descriptions which will be reached in making decisions about optimal provision. Regular action is also needed

‘... to guard against the tendency to assume that a constructed category scheme has a fixed ‘reality’ which is independent of value judgements - about what constitutes a good common curriculum for all children, how much and for whom additional different provision is desirable and which degree of special educational needs will be protected and by what form of protection’ (ibid. :48).

SECTION B : POLICY FRAMEWORK FOR INTER-AGENCY COLLABORATION

Inter-agency collaboration in assessing children's special educational needs

The lack of inter-professional and inter-agency collaboration in the children's field was highlighted as far back as in 1950s. Indeed, this was initially the reason for the establishment of the National Children's Bureau in 1963 (its original title was the 'National Bureau for Co-operation in Child Care). Moreover, the 'Kilbrandon Report on 'Children and Young Persons in Scotland' (Scottish Office, 1964), besides proposing that the Children's Hearing system should be established in Scotland, also recommended the establishment of a new department, the 'social education department' which would bring together both education and social services for children. Thus, the Kilbrandon Report envisaged a very close relationship between education and social work departments. However, when social work services were reorganised in the late 1960s, the government established a unified social work department which was perceived as more widely based and able to bring together services for all people who were in need rather than only

children (Bruce, 1978). Although the organisational convergence of social work and education conceptualised by Kilbrandon was never achieved, the 1966 White Paper stressed co-operation among services as a prerequisite for the effectiveness of the social work department. In particular, the 'White Paper on Social Work in the Community 1966' (para. 12) states that the success of the new department

'will depend on the degree to which it can gain the support and influence the work of many other public and voluntary services. For example, it will have to co-operate closely with education authorities ...'

'The Seebohm Report on Local Authority and Allied Personal Social Services (1968)' in England and Wales also stressed the need for co-ordination and co-operation between education and social work authorities.

A decade later, the 'Report of the Warnock Committee on Special Educational Needs (Department of Education and Science, 1978)' emphasised the need for inter-professional collaboration and stressed the importance of parental participation. According to the Warnock Report the success of the construction of educational programmes for children with special needs depends upon the early discovery and *accurate assessment* of their needs. The Warnock Report recommended, therefore, that when local authorities make assessments for children with special needs, the contribution of the social work personnel will, on many occasions, be of considerable importance (para.15.42). Thus, mainstream schools should have a close relationship with the locally based social work team in order

to gain access to information about a child's social background (para.15.42). The Warnock Report also suggested that social services departments should always be informed of referrals for formal assessment of children's special educational needs in order to be able to make a valuable contribution if they wish to do so (para.2.73). Social work staff should also be informed of the decision by a local authority to statementing/recording in order to make social service support available if asked for by the family (para.4.69, 14.23 & 15.42).

All these recommendations were approved and translated into the 1981 Education Acts. However, as will be shown in the research studies reviewed in the following chapter, the attempts of the above Acts to increase the frequency and quality of collaboration between local authorities were not fruitful. For this reason the Scottish Office Circular 4/96, which is based on the Education (Scotland) Act 1981 re-emphasised the importance of close collaboration between education, health and social work departments.

It is important here to clarify that while the circular can advocate collaboration and point out the legislative context which requires or encourages it, there are limits to what it can actually require agencies to do. This is noticeable in the following two quotations which go only as far as suggesting what agencies should do when they plan to assess children's special needs.

'Whether or not they eventually have a Record of Needs opened for them, children and young persons with special educational needs stand the best chance of receiving the quality of education they require when their needs are assessed thoroughly. Well

structured assessment procedures can ensure children are properly catered for in their first years at school, and that their needs are provided for promptly and appropriately. This requires close co-operation between parents and all the statutory agencies and a full understanding by each of the participants of the part that they, and others, play in the process' (ibid, 67:17) .

Same Circular paragraph 94

'Children with special educational needs may also have social care needs which if addressed could have a positive impact on their educational development. Therefore, at an early stage in the assessment, education authorities should consider whether it is appropriate to request the advice and support of the social work authority. The current position is that a local authority as a social work authority has functions in connection with the promotion of social welfare, under the Social Work (Scotland) Act 1968. In future, a local authority will have functions under the Children (Scotland) Act 1995 to promote the welfare of children "in need" for the purposes of the Act ... It is expected that these provisions will not be brought into force until April 1997, but it is clear that education and social work should in any event adopt a collaborative and co-ordinated approach, seeking to avoid unnecessary duplication of processes in order to serve the best interests of the child'.

With regard to the new legal requirements of local authorities concerning children in need, Section 22 of the Children (Scotland) Act 1995 states that :

‘A local authority shall (a) safeguard and promote the welfare of children in their area who are in need; and (b) so far as is consistent with that duty, promote the upbringing of such children by their families, by providing a range of services appropriate to the children’s needs’

The Children (Scotland) Act 1995 also *requires* education, health and social work departments to collaborate in order to produce a Children's Services Plan which would specify the provision of relevant services offered to all children (with or without special needs). The Act pointed out that drawing up such plans would encourage local authorities to make explicit their policies, to recognise the implicit resource implications, and therefore to enable more effective monitoring of service provision to be undertaken. Thus, the requirement to develop Children's Services Plans is a further incentive to develop greater inter-agency collaboration (Children's Services Plans will be further discussed in chapter 5).

In the guidance and regulations of the Children (Scotland) Act 1995 it is also stated that social work departments should

'make arrangements with local education departments, Health Boards and NHS Trusts, and primary care teams, for sharing information, joint assessment and provision of health, education and social work services in individual cases, in the light of the requirements for collaboration under the Act' (my emphasis) (Guidance and Regulations, 1997, Vol 1, para. 11:31).

Moreover, the Children (Scotland) Act 1995 imposes on Education and Social Work Departments the duty to make known their plans to assess children with special needs in order joint assessments to take place. For reference, the relevant sections are as follows :

'Education and Social work departments *should* develop joint procedures to make sure that assessments for different purposes are well-co-ordinated, do not duplicate effort and place families under great stress. *Education departments should notify social work departments of impending assessments of special educational needs involving children with disabilities* (my emphasis) so that the social work department may consider whether a conjoint assessment of needs under the 1995 Act should be undertaken. *Similarly the education department should inform the social work department when a Record of Needs is opened* (my emphasis). The local authority *should* advise families of the local arrangements for sharing information between departments when this would assist assessment or improve their capacity to provide services' (Guidance and Regulations, 1997, Vol 1, para. 48:40).

and paragraph 51 of the same source

'The Children (Scotland) Act 1995 and the Education (Scotland) Act 1981 together *create a new framework within which social work and education departments can co-ordinate assessment and services for children with special educational needs including children with disabilities*' (my emphasis) (ibid, para. 51:41).

Summary

The first section of this chapter demonstrated how the Warnock Report led to the abolition of the old statutory categories of handicap and to their replacement with the terms 'learning difficulties' and 'special educational needs'. Although the Warnock Report and, subsequently, the 1981 Education Acts were generally welcomed, it was shown that they were severely criticised on a number of levels, mainly for the definitions they contain and for their unclear and inadequate guidelines which have had considerable implications for implementation. The identification and assessment procedures prescribed in the Scottish Act as well as in more recent policy documents were also reviewed. In the second part of this chapter it was shown that although a number of previous policies have encouraged local statutory agencies to collaborate in assessing children's special needs, only since the introduction of the Children (Scotland) Act 1995 are education and social work departments required to collaborate in assessing children's needs.

In reviewing the literature on special educational needs and inter-agency collaboration, the next chapter will develop a rationale for the models employed in this study.

CHAPTER 2

CHAPTER 2

LITERATURE REVIEW AND THEORETICAL FRAMEWORK

Introduction

This chapter attempts to sketch out a conceptual framework for understanding special educational needs and inter-agency collaboration. The first section begins with a consideration of the ambiguities within the associated terms and continues with the review of a number of research studies undertaken in the special educational needs field. The process of change in the perception of special educational needs is examined and it is demonstrated how different policies are derived from these perspectives and that policy makers favor different perspectives over time. This section closes with arguments for an eclectic theoretical approach in research in this area. In the second section three theories of understanding inter-agency relations are examined, their relevance to the study is discussed and it is argued that studies in inter-agency relations should adopt an integrated theoretical approach.

SECTION A: LITERATURE REVIEW

Literature on inter-professional and inter-agency collaboration

Defining co-operation, co-ordination and collaboration

Defining the above mentioned terms is not an easy task for two reasons. Firstly, because of the definitional ambiguity, which becomes evident from the different ways that various authors have defined these terms. If we take the term co-ordination as an example, some of the definitions that have been offered are:

'Co-ordination is the extent to which organisations attempt to ensure that their activities have taken into account those of other organisations' (Hall et al, 1977:459).

'Co-ordination is the process whereby two or more organisations create and/or use existing decision rules that have been established to deal collectively with their shared task environment' (Mulford & Rogers, 1982:12).

'Co-ordination is a structure or process of concerted decision-making where in the decisions or action of two or more organisations are made simultaneously in part or in whole with some deliberate degree of adjustment to each other' (Warren et al, 1974:16).

'Co-ordination is a pursuit of competence, consistency, comprehensiveness and harmoniousness or compatible outcomes' (Challis et al, 1988:25).

An additional complication is that some authors use the term collaboration synonymously with the way in which some use the terms co-operation and co-ordination. Examples of this case include Williams who defined collaboration as 'joint working in the interests of a common aim, that aim being to achieve more effective services to recipients' (1986:39), Armitage who suggested that collaboration is 'the exchange of information between individuals which has the potential for action in the interests of a common purpose' (1983:75) and Westrin who defined in his study concerning co-operation between health and welfare staff the term co-operation as 'all conscious efforts of agencies or individuals to direct their work towards common goals (1987:7).

While some people have used the above terms synonymously others differentiate them. Davidson (1976) in his typology of inter-organisational relationships stated that co-ordination is only one of several forms of inter-organisational relationship. He proposed that types can be represented as overlapping segments of a circle, each merging into the next. In ascending order of complexity, these types were: *a) Communication/Consultation* where interaction is limited to discussing together, sharing information and informing other professionals of decisions and developments of mutual interest, *b) Co-operation/collaboration* where professionals involved in collaboration agree to common goals but their relationship is informal and lacks a clear understanding of the operational goals of each service and how each contributes to the generally desired 'direction', *c) Co-ordination* where the professionals' relationship is more formal and their tasks and goals more explicit but there is no endorsement in such interactions, *d) Integration* where professionals have common policies, priorities, agreed plans, there are

clear arrangements and well-defined tasks and lastly, *e) Merger* where the participants merge their separate professional identities and form a new unitary organisation.

Having considered the ambiguities associated with these terms the researcher decided to use the term collaboration in the study on the grounds that this term was most closely related to the theoretical perspectives used in the study.

Defining inter-professional and inter-agency collaboration

According to Mackay et al (1995) working inter-professionally means crossing occupational boundaries, setting aside the 'rightness' in your discipline and having a willingness to listen to what colleagues from another occupation are saying. Mackay et al go on to argue that it is hard enough to work well inter-professionally but intra-organisationally without the added difficulty of having to work well inter-professionally and inter-organisationally (i.e. with professionals outside the agency).

Scott, (1997) argues that studies about inter-professional and inter-agency collaboration in welfare agencies tend to frame collaboration as primarily an inter-professional issue and, therefore, their focus is on differences in professional values, power and knowledge. As Scott rightly claims 'while these are important dimensions, framing it in this way fails to recognise the significance of organisational culture, structure, mandate and imperatives'.

This study has considered the above concerns and in chapter 9 an integrated approach, which explores both the environmental and intra-organisational factors that influence the collaborative activities between education and social work staff, is employed.

Review of research studies

In Britain there is a small but growing literature on collaborative welfare relationships. However, the bulk of these studies concentrate on two areas: community care, particularly, collaboration between health and social work departments and inter-agency collaboration in child protection (Cooper et al, 1975; Hallett & Stevenson, 1980; Pfeiffer & Naglieri, 1983; Hallett, 1995; McGrath, 1995).

According to Hallett & Stevenson (1980) the need for collaboration between health, education and social work departments comes from the disjointed and uneven way in which services are developed and delivered. As they rightly point out, when services are uncoordinated, resources are wasted and such lack of cohesion is harmful to children and their families. Warr & Wall, (1978) go a step further in arguing that not only is inter-professional and inter-agency collaboration an organisational necessity but also it is a human necessity. Human necessity involves behavioural aspects of work and well being of those within an organisation. Mainly, it concerns the client and the need for professionals to address themselves to the client as an individual, as a family member and as a member of the society in which he/she lives. It is this recognition which has a great influence in the collaborative relationship between education and social work staff in assessing children's special educational needs.

Regarding the impact of the 1981 Education Acts, Goacher et al (1988) and Thomson et al (1989) found a number of inconsistencies in the implementation of the Acts which they believed might be caused by the lack of consistent and precise guidelines. More specifically, both studies identified variations among education authorities in the proportion of children for whom Statements (England and Wales) or Records of Needs (Scotland) were opened. Both studies also found that statementing/recording policies operated differently in different areas, with an apparent lack of consistency regarding the types of difficulty judged to merit a record or statement. The research also brought to the fore difficulties in achieving partnership with parents and found a great divergence of practice in the integration of children with special educational needs. Moreover, according to Goacher et al (1988), a mixture of geography, politics and luck has influenced the type of provision provided to children with special educational needs.

As far as inter-agency collaboration in the special educational needs field is concerned, Goacher et al's (1988) study revealed that the extent of multi-disciplinary involvement in the assessment procedures varied enormously, but, overall, educational psychologists had the lead role in formulating the nature of children's educational needs. Their study found little evidence to suggest that collaboration in the children's special educational needs assessments involved anything more than collecting reports from individual professionals involved with children being assessed. Moreover, there seemed to have been little direction from management to field social workers about their new responsibilities under the 1981 Education Act. These uncertainties were also confirmed by the extremely low response rate of social services departments (4 out of 120 invitations to a series of

conferences held by the team of that study in order to discuss the effects of the Act on the health, education and social services). Social work staff explained that there had been some confusion in their departments as to who should go to the conferences. In addition, there were differences in perceptions of responsibility for financial resources for children with special needs. Goacher et al (1988) argue that these differences were closely related to lack of clarity as to how and by whom resources for children with special educational needs were to be financed.

Galloway et al's study (1994) of the assessment of children with emotional and behavioural difficulties which was also conducted in England found similar results to those of Goacher et al's (1988) study with regard to inter-agency collaboration. More specifically, there was little evidence of multi-disciplinary collaboration in the assessment of children with special educational needs. Their study concluded that

‘... the assessment process can give rise to conflicts of interest, that the “smooth teamwork” envisaged in the Warnock Committee is difficult to achieve, and that it is questionable whether professional judgements are always made in the best interest of the child’ (1994:121).

No wonder then, that Galloway et al's recommendations included further research on the role of the professionals involved in the special educational needs processes as well as on the factors that influence such collaborative relationships.

One part of Thomson et al's (1989) study concentrated on inter-agency collaboration in the process and drafting of Records of Needs. Semi-structured interviews with education

officers, principal educational psychologists and medical officers were carried out with the aim of examining the part played by the key professionals in the implementation of the Scottish Education Act. It is important here to mention that due to constraints of time the team did not carry out interviews with the full range of professionals involved in assessment and recording. Thus, teachers and social workers were not interviewed. However, the study indicated that there was poor collaboration between education and social work departments. Relations with social work departments seemed to be tenuous with little reference being made to their role. According to Thomson et al, '... systematic communication and co-operation between staff of education, health and social work appeared to be a largely unfulfilled objective of the legislation' (1991:53). As with Galloway et al (1994), Thomson et al's (1988) recommendations included further research on inter-agency collaboration in the special educational needs field and, more specifically, on the role of teachers and social work staff because, in their own words, such interviews can 'cast interesting light on their perceptions of their roles and those of the other professionals' (1991:52). This becomes even more significant with the recent implementation of the Children (Scotland) Act 1995, since inter-agency collaboration is now required (see chapter 1).

A conceptual framework for special educational needs: An eclectic approach

Before proceeding to the review of the various ways of conceptualising special educational needs it is important to clarify that although the perspectives reviewed in this sub-section are referred to disability they equally apply to special educational needs field

because, as explained in the previous chapter, disability is included in the special educational needs spectrum.

Essentialist perspective

The earliest approach is widely known as 'individual' or 'psycho-medical' model and lasted approximately from 1940s to around 1970s. The reason for the former term is the belief that a characteristic or deficit is inherent within an individual and is likely to have biological rather than social causes (Oliver, 1983:15; Oliver, 1990:2-3). During the nineteenth century, the medical profession developed and maintained an interest in all kinds of 'defects' and it was medical influence which dominated official thinking on disability issues. People with 'deficits' were defined as 'sick' or in need of 'treatment' and ways of explaining their behaviour were greatly influenced by the opinions of medical professionals.

As the underlying epistemology of the psycho-medical model has a clear positivist-empiricist standpoint and focuses on micro-level (individual) phenomena, it is not surprising that the forms of intervention proposed were diagnostic testing (e.g. IQ) and quasi-clinical remediation (Skidmore, 1996). As Bart rightly points out, this model largely functioned '... to ascribe an individualised, objective character to handicapping conditions and to exclude discussions about possible social determinants' (1984:82). In that period, many professionals expressed the idea that special, rather than ordinary, education should be provided for children with special educational needs (Barton & Tomlinson, 1981 ; Halliwell & Williams, 1993).

The essentialist perspective and its policy implications have been criticised on a number of levels. First, this paradigm is based on a 'individual pathology' model of special needs in which the functional limitations of individuals are emphasised and the major interest is in what can be done to and for such people. Second, a major weakness of this paradigm is that it fails to take account any possible social determinants. As a result, the handicaps of special children are conceptualised as individual deficits and not as the outcomes of a range of complex, interacting factors. The source of disabled behaviour is, therefore, conceptualised as asocial and individual.

Social constructionist perspective

The second model employed is commonly known as the 'social or sociological model' and lasted approximately from 1970s to 1980s. In contrast to the psycho-medical model, the sociological model has a structuralist character. It focuses on macro-level (societal) phenomena and the forms of intervention proposed are radical changes in society in general and in the education system in particular. In other words, the sociological perspective locates 'the problems' of children with special educational needs within society.

The articulation of the social model was received much more enthusiastically by disabled people because of its immediate relevance to their own experience. It is important to mention that this is not accidental as this model was set forth by Oliver, who is himself disabled. Within the social model, disability is seen as arising not as a direct result of the disabled person's impairment, but out of society's failure to take into account the needs

of disabled people and to ensure the provision of appropriate services (Oliver, 1990 and 1992). Consequently, special educational needs according to this model, refer to all things and situations that impose restrictions on persons with special needs. The problem of people with special needs is therefore regarded as a 'public issue' and the focus is placed on

'...the role of society in its manufacture - by directly causing physical and mental impairments, by applying pejorative labelling processes; by operating economic social and political institutions which are deaf to the needs of disabled people' (Borsay 1986:192).

According to Oliver the social model itself can be located within the original statement of the Union of Physically Impaired Against Segregation, which states:

'In our view it is society which disables physically impaired people. Disability is something imposed on top of our impairments by the way we are unnecessarily isolated and excluded from full participation in society '(UPIAS, 1976:14).

From this perspective, adjustment becomes a problem for society not for persons with special educational needs and there is a need for society to change either its patterns and expectations or the existing barriers that are derived from its failure to adjust (Oliver, 1983). It follows from this that society disables people with impairments by the way in which it responds to those impairments. The following quote is an example of such a position:

‘The inaccessibility of buildings stems from decisions to design them in particular ways and not from the inability of some people to walk. The solution to this particular problem is to create a barrier-free environment not to attempt to provide disabled people with the skills necessary to cope with steps’ (Oliver, 1988:17).

Thus, it is society that has to remove its social barriers and change, not individuals. If education is taken as an example, the individual model focuses on the problems that children with special needs encounter in terms of getting in and out of the school, in case of physical disability, their need for special assistance during lessons in case of children with special educational needs such as children with dyslexia or moderate learning difficulties, their need for special equipment such as computers and so on. This approach focuses on the functional limitations of individuals in attempting to use the social environment and, as such, does not favor the integration of children with special educational needs into mainstream schools. In contrast to this, the social model sees special educational needs as being created by the way mainstream schools are unsuited to the needs of children with special educational needs. Thus, according to this perspective, the problem is not located within the children but within society. What is needed, therefore, is a number of changes in social policy such as adaptation of school buildings, the provision of qualified staff, and planning of services that are tailored to particular needs of children with special educational needs.

According to the social constructionist perspective, professionals should refocus their efforts away from the provision of personal aids and remedial therapy, and concentrate on adapting environments so as not to restrict people with special needs. In the case of the

assessment of special educational needs, professionals should look for the processes which produce the categories of special educational needs rather than to assume that the categories arise from the intrinsic qualities of the children. This, of course, calls for a different approach from that of the psycho-medical model. For instance, as Squibb (1981) rightly points out, instead of saying 'we need to know more about the child' the structuralist approach says that we need to know more about the context which produced the notion that the child is, or has, a problem.

Perhaps the major achievement of this model is its detailed explanation of the relation between special education and the rest of the educational system and the wider society, including the economic and political features of the system. In the aftermath of this brief analysis of the social determinants, it is no longer possible to locate 'problems' solely within the children with special needs.

Against this achievement, however, it is important to mention that neither the psycho-medical nor the sociological model has managed to overcome the common fault of reductionism since they both have a tendency to explain an intrinsically complex phenomenon in terms of a single, unidirectional model of causation and, consequently, to propose a single form of intervention as a complete and adequate solution to the problem (Tomlinson, 1982; Skidmore, 1996).

Materialist perspective

A third way of theorising special educational needs has arisen in recent years. Very broadly, those working within a materialist perspective assert that people with special

needs are socially oppressed and that their oppression is not reducible simply to problems within the individual or within the attitudes of others, but is rooted within economic structures (Riddell, 1996). As Abberley argues, the oppression of people with special needs has to be accounted for in material terms, thus, 'the main and consistent beneficiary must be identified as the present social order, or, more accurately, capitalism in its present historical and rational form' (1987:242).

Although materialist perspectives have been accepted by many activists within the disability movement, they have been criticised by others as overly reductionist because of their emphasis on the economy as the basis of the oppression of people with special needs.

To summarise, it is evident that special educational needs have been theorised in a range of different ways and that such theories have been either explicit or implicit. As Riddell (1996) rightly point out, in all these perspectives, the way in which difference is construed is crucial. Within an essentialist or 'psycho-medical' approach, the task of professionals is considered to be that of identifying and thereafter providing services to meet the needs of individuals with particular categories of special educational needs. Social constructionist or social perspectives, assume that differences are due to prejudiced perceptions which can and should be altered through rational argument and structural changes. Materialist perspectives consider oppression based on special needs as reflecting inequalities of social class and/or social status requiring economic and ideological change.

At this point it is important to understand the way in which such perspectives have fed into official educational discourses.

Riddell (1996) claims that, although in policy there was a transition from essentialist to social creationist and, to some extent, to materialist perspectives, this transition did not last long, as there was a reversion to essentialist thinking and practice.

'Whereas Warnock and the 1978 Report appeared to represent a shift away from an essentialist discourse, more recent policy documents, fuelled by attempts to increase centralised control whilst simultaneously promoting market-driven approaches, indicated a move back towards a child-deficit model and the maintenance of the boundary between 'normal' children and those with special educational needs' (1996:101).

From the analysis so far it is clear that none of the perspectives reviewed is flawless and, consequently, ideal. What is needed therefore is an eclectic approach, borrowing from a range of theories which are likely to be helpful in understanding and assessing special educational needs. However, as Riddell (1996) rightly points out, there are dangers in theoretical eclecticism, '... since it is possible to side-step the question of whether some theories are mutually exclusive' (1996:102). It is clear, therefore, that eclecticism should be undertaken with extreme care and skepticism, if the assessments of special educational needs are to have effective outcomes for both professionals, parents and children with special educational needs.

SECTION B: THEORETICAL FRAMEWORK FOR INTER-AGENCY COLLABORATION

Theorising inter-agency collaboration: An integrated approach

Exchange theory

The social exchange theory was initially formulated by Homans (1951). A few years later the concept of inter-organisational exchange was developed by Levine & White (1961) and, subsequently, it has been fruitfully applied by several other researchers (Adamek & Lavin, 1969; Sutton, 1979).

Levine & White (1961) in their article 'Exchange as a conceptual framework for the study of inter-organisational relationships' assert that welfare organisations need three main elements: clients, personnel and non-human resources, such as equipment, knowledge and funds, in order to achieve their goals. Often these are in short supply and, under actual conditions of scarcity, organisations co-operate or engage in inter-organisational exchanges of the resources essential to goal attainment.

'Obviously there will be no exchange of elements between two organisations that do not know of each other's existence or that are completely unaware of each other's functions. Even more, there can be no exchange of elements without some agreement or understanding, however explicit. These exchange agreements are contingent upon the organisation's domain' (Levine & White, 1961:597).

In the same article the organisational exchange is rather broadly defined as 'any voluntary activity between two organisations which has consequences, actual or anticipated, for the realisation of their respective goals or objectives' (1961:583). Levine and White argue that this definition has several advantages. First, it refers to any kind of collaborative activity and not exclusively to reciprocal exchange (unilateral, joint and reciprocal). Second, this definition widens the concept of exchange beyond the transfer of material goods and beyond gratification's in the immediate present. This definition allows therefore the consideration of a number of dimensions of organisational interactions. Lastly, although the organisations may not be interacting on equal terms, the collaborative relationship does not involve physical coercion or domination since its nature is voluntary.

According to this perspective, the motivation to collaborate is, therefore, internal to each organisation and inter-organisational relations form when members of organisations perceive mutual benefits or gains from interacting, although, there is not always a symmetry or equality in the exchange. Consequently, it is suggested that the collaborative relationships are characterised by a high degree of co-operation and problem-solving.

In summarising, the exchange perspective assumes that the nature of the inter-agency collaborative activity is goal-directed and, consequently, that organisational decisions are rationally calculated on the basis of self-interest. However, in reality the nature of the collaboration is not always internal/voluntarily, but it can also be external/involuntarily or interchange from one form to another. This suggests that exchange interactions should be

compatible with the existence of power and dependency in inter-organisational relationships, concepts which are central to the second key perspective in this study.

The power/resource dependency model

The power or resource dependency approach to inter-organisational relations is associated with the work of Aldrich (1972; 1979) and Benson (1975). This perspective puts an emphasis on the links between organisations and their uncertain environments and it claims that inter-organisational relations are instrumental in controlling organisational environments. According to Birchall and Hallett the power/resource dependency model shares with the exchange perspective 'a focus on the resource acquisition activities of organisations, especially securing an adequate supply of money, and of authority, defined as the legitimisation of activities' (1992: 28).

This perspective assumes that organisations seek to manage their environments to reduce dependencies and uncertainties, including those stemming from other organisations. It also assumes that environmental resources are in short supply because of inter-organisational competition and that agencies survival is dependent on the acquisition of scarce resources at the expense of other organisations.

The power/resource dependency perspective is well summarised in the following quotation

'Other organisations are the key elements in most organisations' environments, as they control the flow of resources in a society. The interorganisational division of labour, under the pressure of

resource competition, ensures that most organisations must seek out others with the specialised resources they require. If an organisation seeking resources from another controls strategic resources, has access to alternative sources, can use coercive power, or can modify its goals and technologies to do without the resource, it can avoid becoming dependent on the supplier. If, however, these conditions are not met or if the supplying organisations make effective countermoves to blunt attempts at interdependence, an organisation in need may find itself in a dependent relationship. An organisation in a dependent position vis-a-vis a dominant organisation might be forced to comply with requests inimical to its own interests. Dependence is thus the most important interorganisational relation, and the resource dependence perspective on administrators' behaviour gives a primary role to the concepts of dependence and power' (Aldrich, 1979:290).

In this perspective, the domain consensus, an important feature of the voluntary interactions of the exchange perspective, are much less prominent. Instead, power is more important and the motivation to interact is asymmetrical, with relationships developing when one or more organisations have the power to force or induce other parties to interact. For those agencies forced to interact, the motivation is external and involuntary and not the result of the free pursuit of organisational self-interest. As a result bargaining and conflict characterise those relationships, as opposed to the co-operative character of the exchange approach, although in both models inter-organisational dependence is central to the analysis (Birchall and Hallett, 1992).

Exchange and resource dependency perspectives are sometimes presented as alternative or competing developing along parallel but separate paths. As Schmidt & Kochan (1977)

rightly argue this is unhelpful since inter-organisational reality is not as simple as these approaches indicate. Rather than engaging exclusively in one or the other type of interactions, organisations are usually engaged in some exchange and some power dependency inter-organisational relationships. In addition, they claim that real-life interactions, are inevitably unlikely to fit exactly the ideal types identified in the perspectives but rather to reflect mixed motives. Thus, Schmidt & Kochan (1977) argue for an integrated view of inter-organisational relations which can incorporate the basic premises from both models. Cook (1977) in her article 'Exchange and power in networks of inter-organisational relations' adopts this integrated approach.

Because of this degree of commonality, the criticisms which can be made of one perspective apply equally to the other. For instance, as explained earlier, both models assume that inter-organisational relationships are created from the attempts by individual agencies to secure resources required for goal achievement. This assumption has, however, been questioned by Hall (1977) and Perrow (1979), amongst others. They stress the difficulty of identifying clear and unequivocal goals for reasons which include the distinctions drawn between what organisations say they do and actually do, the existence of multiple and often competing goals and the different perception of goals by different members of the organisation (Hallett, 1995).

Moreover, both perspectives emphasise the ability of organisations to engage in rational decision-making in pursuit of the goals. The capacity of organisational members to make such rational decisions has been questioned by several sociologists, including Whetten and Leung (1979). They state that the rational decision-making perspective assumes that

managerial staff in organisations have considerable freedom to choose between alternatives but this not always the case.

'Within the context in which linkages between public agencies are established, frequently these assumptions cannot be met. There are environmental conditions that restrict the autonomy of the administrators to choose freely between alternatives, and there are organisational conditions that restrict their use of rational criteria' (1979:238).

At this point it is important to mention that the resource dependency perspective acknowledges this argument to some degree. As explained earlier, the power/resource dependency model claims that organisations are sometimes forced into linkages that they would not have chosen, but the focal organisations are nevertheless assumed to act on the basis of rational self-interest. In real-life, however, all the welfare agencies may be constrained by a legal (mandated collaboration), administrative (local authority policies) or social (pressure groups) directive from a higher level.

This suggests that inter-organisational linkages should be related to the wider economic, political and social forces, principles which are central to the last perspective used in this study, the political economy perspective.

The political economy theory

This perspective is often seen as an extension of the previously analysed model, not only because it has a lot of similarities with the power/resource dependency perspective but also because it was developed by Benson, who was one of two originators of that

approach. Benson (1975 and 1982) sees these models as embedded in a limited problematic, characterised by its decontextualised nature. He suggests :

'the problematic does not include a concern with or theory about the larger societal context and its institutional arrangements. Interorganisational phenomena - dyads, sets, networks, are theorised as if context-free. Resource dependencies and other interorganisational relations are then analysed without regard to the larger political and economic structures in which they are embedded particularly those of the capitalist mode of production and capitalist state apparatus' (1982:145).

From the discussion so far it is apparent that a study of inter-organisational collaboration should incorporate the three perspectives analysed above. In chapter 7 an attempt is made to examine the inter-agency collaboration between education and social work staff from an integrated theoretical perspective. Moreover, an inter-organisational analysis of the environmental and intra-organisational factors that influence such collaborative activities is undertaken in chapter 9.

Summary

In the first section of this chapter ambiguities within the associated terms were discussed and findings from relevant research studies were summarised in an attempt to indicate which issues have been neglected in the available literature. It was stated that this study would try to fill in gaps concerning the contribution of social work staff to the assessment of special educational needs and the factors affecting the collaborative relationships between education and social work staff. The three main perspectives of conceptualising

special educational needs were examined. The transition from essentialist to materialist perspectives was discussed. It was then shown that different policies are derived from different models of special educational needs and that policy makers favor different perspectives over time. Arguments for adopting an eclectic theoretical strategy as to the special educational needs perspectives were also given in this section. In the second section, the three main theories for understanding inter-agency relations and their limitations were discussed and arguments for an integrated theoretical approach were put forward.

Having set out the conceptual framework that underpins this study, it is pertinent now to shift to pragmatic issues such as how this study was planned and carried out and, therefore, to move to methodological considerations.

CHAPTER 3

CHAPTER 3

METHODOLOGICAL CONSIDERATIONS

Introduction

Hammersley (1990) cited Weber in arguing that methodological considerations are only important when the researcher is having some difficulty in achieving his/her research aims. The researcher, in this case, has to set down the tools he/she uses succinctly and clearly as a way of telling the reader how he/she reached his/her conclusions. It is argued that there is a need for every researcher to describe what he/she has done and why because this helps the reader to grasp the thinking that informs the study. Thus, this chapter discusses the way that this thesis developed from inception to conclusion and elaborates on the relevant methodological issues.

Translating the aims of the study into research questions and methodology

The review of the literature on inter-professional and inter-agency collaboration indicated that there was little information on patterns of collaboration between education and social work authorities in assessing children's special educational needs. Thus, there was a need initially to look at the current situation in Scotland.

In order to do so all the Scottish education and social work authorities need to be contacted. This required a research method which enabled contact to be made with a large number of professionals who were spread over a wide area, in as short a time and



with as a low cost as possible. A postal survey fulfilled all these criteria and appeared to be the most appropriate way of gathering information from these widely dispersed groups.

However, since this method could not offer a full insight into the inter-agency relations, and assessments processes it was followed up with three in-depth case studies. As explained earlier, this stage of the research aimed at the investigation of the collaborative arrangements as well as an examination of the experiences and perceptions of a number of key players involved in the process of assessment.

The research aims were addressed by attempting to answer the following questions :

- **When did the education and social work authorities in Scotland establish collaborative procedures for assessing children's special educational needs ?**

(Before/after the implementation of the Children (Scotland) Act 1995)

- **What are the most common patterns of collaboration in education and social work authorities in Scotland ?**

(Range of professionals involved, frequency of collaboration, criteria and forms of collaboration)

- **What are the differences in the service provision in the case study authorities and how do they influence the collaboration between education and social work staff ?**

(Whether they had under 5 social work services and whether the educational psychologists collaborated with them)

- **Why have different forms of collaboration developed and what are the ideal**

collaborative arrangements for assessing children's special educational needs ?

(Whether formal/informal collaborative arrangements)

- **What are the professionals' and parents' experience and perceptions of such collaborative relationships ?**
- **Who benefits from the assessment of special educational needs process ?**
- **Which factors do influence the inter-agency collaboration and the decision-making in the special educational needs ?**
- **How can the inter-agency collaboration be assured, maintained and enhanced ?**

In summarising, *quantitative data* collected in the first stage of the study by means of *postal survey* and *qualitative data* collected in the second stage of the study via the use of *case studies* which used a range of research methods.

Rationale for using a multi-method research strategy

Bulmer et al (1986) claim that 'different research methods are not inherently better or worse than any other on the basis of intrinsic qualities, but superior or inferior for particular purposes' (ibid:187). In the same vein Bryman (1988) states that gradually the question has shifted from "which method is most valid ?" to "which method is best for what purpose under what circumstances ?".

For example, according to Bullock et al (1992) the survey is most appropriate when the goals of the research require quantitative data and especially where large-scale issues are considered; when the information required is rather specific and known to the people who are studied; and when the researcher has already a lot of knowledge about relevant

problems and the range of responses likely to arise. Case studies are preferable when the research calls for exploration of processes and themes that occur within a general cluster of factors or when the study seeks the assessment of the consequences of individual's perspectives.

Although the complex nature of the research questions and the purpose of the research were important reasons for combining qualitative and quantitative methods in this project, a number of other advantages of the multi-method approach such as the *triangulation* (in the sense of seeking convergence of findings), *complementarity* (in that overlapping and different aspects of a phenomenon may emerge) and *expansion of the data* (where the mixed methods add scope and breadth to the project) contributed to the decision to adopt this research strategy (Bryman, 1988; Brannen, 1992; Robson, 1995).

According to Brewer & Hunter (1989), convergence of findings is achieved through combining methods whose weaknesses differ. Bullock et al (1992) state quantitative findings can be clarified by qualitative case studies. In similar vein, Robson (1995) argues that 'surveys provide a general, representative, picture; the case studies, chosen often on the basis of the survey, illuminate, enrich and bring to life the survey findings (1995: 125).

As already stated at the beginning of the chapter, in order to establish the current patterns of collaboration between education and social work authorities in Scotland and to select a limited number of 'case-study authorities' it was necessary to conduct a census survey. Thus, in this study the quantitative research preceded and facilitated the qualitative research which formed the core of the study.

Rationale for the choice of the type of survey

There are two main types of social surveys : interview surveys and mail or postal surveys. Consideration was given to both of these types of survey before a suitable method was chosen. The advantages, disadvantages and the reasons for choosing to conduct the mail survey in this particular study are considered below.

Interview surveys

The personal interview is potentially an extremely sensitive device for the collection of reliable and valid data. Its main advantage is that it usually has a much higher response rate than a mail survey. Face-to-face interaction can be instrumental in establishing rapport, which leads to trust, willingness to participate and a higher level of motivation from a respondent. It also allows greater flexibility than the mail questionnaire, as the interviewer can repeat or rephrase questions to ensure that the respondents have understood them. Moreover, in an interview, there is the possibility of standardising the environment in order to ensure that the interview is conducted in private; thus respondents cannot consult someone else before giving their answers (Moser & Kalton, 1979).

However, the financial cost of personal interviews is high if a large number of respondents in different geographical areas are to be contacted and the researcher has to get involved in a considerable amount of travelling (Seltiz et al, 1974 ; Nachmias & Nachmias, 1992).

As contact with all education and social work departments in Scotland was required in the first part of the study and my research costs were not covered by my scholarship or from any other source, the use of face-to-face interviews was discarded in this phase of the research.

Postal survey

A major disadvantage of postal questionnaires is that they often have a low response rate. According to Nachmias and Nachmias (1992) the typical response rate for face-to-face interviews is about 95%, whereas that of a postal survey very often is roughly 40%. A common problem with low response rates is how to estimate the effect the non-respondents may have on the findings because they may be different from those who answer the questionnaire. However, well-designed questionnaires that are short, easy to fill out, simple to return and personalised can have comparably high response rates (Moser & Kalton, 1979). Later on we will return to this issue and explain how a high response rate (92 %) was achieved (Section : design of the questionnaire of the postal survey).

Other disadvantages of the mail survey are that there is no opportunity to supplement the respondents' answers by observational data and that the researcher has no control over who completes the questionnaire. In addition, postal questionnaires require simple and straightforward questions as there is no opportunity to probe or clarify ambiguous answers. However, as Moser and Kalton (1979) argue, what is sufficiently simple and

straightforward naturally depends on the population being surveyed, and the language used should be chosen with the survey population clearly in mind.

Backstrom & Hursh-Cesar (1981) claim that the use of mail questionnaires is particularly successful with professional groups, where the topic being explored is of interest to them. In addition, the mail surveys reduce the bias that may result from the personal characteristics of the interviewer. The final advantage of mail questionnaires - and perhaps the most important one for this particular phase of the research - is that they can be extremely efficient in providing large amounts of data, at relatively low cost in a short period of time (Nachmias & Nachmias, 1992). Undeniably, the postal questionnaire is generally cheaper than other methods because as Selltiz et al (1959) very rightly state 'questionnaires can be sent through the mail; interviewers cannot'.

Despite the disadvantages of using mail questionnaires, its advantages made it the most appropriate method for the first part of this research. As it can have a high non-response rate possible ways of ensuring a good response rate were considered and are discussed in the section 'sending out the postal survey and strategy adopted for the non-respondents'.

The sampling of the questionnaire of the postal survey is discussed in the remainder of this section.

A population consists of a number of units of enquiry and the researcher should decide whether information will be sought from all or only from some of these units, in other words, if he/she will undertake a census or a sample survey. In a sample survey, the surveyor infers information about a population from a sample drawn from that population and the sample is either a simple-random or a stratified-random. In a census survey, an

attempt is made to collect data from each and every member of the population studied. The census survey is usually conducted when a population is relatively small and readily accessible. (Moser & Kalton, 1979; Gay, 1987). Since the population was relatively small (32 councils) the latter type of survey was used in this study and questionnaires were sent to all Directors of the social work and education departments in Scotland.

Rationale for using case studies

According to Robson (1995), a case study is 'a strategy for doing research which involves an empirical investigation of a particular contemporary phenomenon within its real life context using multiple sources of evidence' (ibid:146). Although the individual person as the 'case' is usually what springs to mind, the 'case' can be virtually anything. Case studies can be done on groups, organizations, decisions, programmes or many other things (Mitchell and Clyde 1983; Yin, 1994). As will be further explained in this section, the 'case

studies' in this research are three education and social work authorities in Scotland but the general case study approach included the examination of six cases in each authority.

It is pertinent here to refer to the critique of the case study approach and to give some general responses to these criticisms as well as some specific responses that are related to this study. There are two major criticisms of the case study approach : its lack of rigor and its lack of representativeness. (Stoecker, 1991; Hamel et al, 1993; Yin, 1994). According to Hamel et al (1993), the case study approach suffers from a lack of rigor in the collection, construction, and analysis of the empirical materials that give rise to a

study. This lack of rigor is associated with the problem of bias. 'Such bias is introduced by the subjectivity of the researcher, as well as by the field informants on whom the researcher relies to get an understanding of the case under investigation' (1993:23). The second 'problem' of this approach is that it does not allow generalisations of the findings to other settings (in the case of this study to generalise to other education and social work authorities) because of '... the lack of representativeness of the case used as a point of observation for the social phenomenon or issue constituting the object of the study' (Hamel et al, 1993:23).

There have been two responses to the above mentioned criticisms. One has attempted to meet the internal and external validity problems by making this approach more sophisticated and rigorous. The second has critiqued the critique (Stoecker, 1991). The two most widely accepted strategies for increasing the internal validity of this research strategy are to advocate 'triangulation' and case comparison (where more than one case study is studied in a single project) (Bulmer et al, 1986; Bryman, 1988; Stoecker, 1991). Both strategies have been adopted in this study, although, the case comparison strategy was used mainly as a way of exploring different patterns of collaboration rather than as a way of increasing the internal validity of the findings.

As Stoecker (1991), argues 'the second, and more effective response to the scientific critique has been a critique of quantitative science which shows the gaps which case study research fills' (ibid:93). He has identified three basic critiques of the quantitative scientific perspective which highlight the strengths of the case study approach. First, probability samples and significance tests do not ensure accurate explanation, second, the

scientific method does not control for researcher bias and, third, the survey research preferred by scientific method supporters is not always useful for applied questions. Mitchell and Clyde (1983) argue that the logic of case studies is theoretically rather than statistically defined. Stoecker (1991) goes further in arguing that

'a variety of explanations can apply to a statistical association, but only careful sensitive research of specific instances that actually show the historical causal process allow us to see which theoretical perspectives provide the best explanations' (ibid:93).

Becker (1966) notes that what the case study does best is study 'process' which is both historical and idiosyncratic. According to him statistical analysis is unable to capture either of these dimensions whereas the case study is able to explain them and this constitutes the source of its strength (Mitchell and Clyde, 1983; Stoecker, 1991). Mitchell and Clyde (1983) assert that the researchers should choose their cases for their explanatory power rather than for their typicality. This argument, which I strongly support, is directly opposed to the quantitative-scientific emphasis on representativeness. Thus, the focus in this study is not on typicality but rather on uniqueness.

Denzin & Lincoln (1994) have identified three types of case study : a) intrinsic case study, b) instrumental case study and c) collective case study. The first type is used when the researcher attempts to gain a better understanding of a particular case. This particular case is not chosen because it represents other cases or because it illustrates a particular problem but, rather, because, in all its particularity and ordinariness, the case itself is

itself of interest. The purpose is not to understand some abstract construct or generic phenomenon but to understand a particular case. In the second type, a particular case is studied to provide insight into an issue or refinement of theory. The case is of secondary interest, in that it plays a supportive role, facilitating our understanding of something else. The case is usually looked at in depth, its contexts scrutinised, its ordinary activities detailed, but only because this aids in the pursuit of something of external interest. Thus, the choice of the case is made because it is expected to advance our understanding of something else. In the third type a researcher may study a number of cases jointly in order to inquire into something and this type of case study is referred to as collective or comparative case study. Denzin & Lincoln (1994) go on to say that this type of case study is not the study of a collective but is an instrumental study extended to several cases which are chosen because it is believed that understanding them will lead to better understanding or better theorising about a still larger collection of cases. The following paragraph will elaborate on the latter type of case study as this type of case study has been employed in this research.

Comparison is a powerful conceptual mechanism and case studies can be designed to be generalisable to conceptual issues. Yin (1994) refers to this as analytic generalisation rather than statistical generalisation. Comparative case studies can be limited to two or three settings or extended to dozens of cases 'either to achieve replication of the same study in different settings or to compare and contrast different cases' (Hakim, 1987:63). Lastly, comparisons may be made across space, time or subject areas, seeking a better understanding of the phenomenon or issue and generalisations from the insights provided

by setting one case against another (Bulmer et al, 1986; Hamel et al, 1993; Yin, 1994). However, the comparative case study method was used in this study mainly as a way of comparing and contrasting different cases across subject areas rather than as a way of increasing internal validity and claiming representativeness.

The comparative case study strategy was chosen for both theoretical and practical reasons. The postal survey provided a general representative picture whereas the comparative case studies illuminated and enriched the survey findings. The combination of survey and comparative case studies offered useful complementary data, giving valuable insights into the issues under investigation. Many of the research questions appeared more amenable to an intensive rather than an extensive approach. The intensive style of the case studies allowed a variety of threads to be pulled together, since they could provide a detailed and precise account of the processes at work. More specifically, they provided a 'holistic' picture of how the relationships between education and social work staff were established and developed, allowed for an exploration of the collaborative arrangements, elucidated the factors influencing such collaboration, and thus addressed the research questions.

The thesis' aim was to achieve something more than a mere report of the phenomenon studied, it attempted to look at why things happened, as much as how they happened, because as Nisbet & Watt rightly note a case study is 'more than just an extended example or an anecdote interestingly narrated. It has the same virtues - interest, relevance, a sense of reality - but it goes beyond mere illustration' (1984:73).

Selection of data collection techniques for the case studies

The use of a range of data collection techniques makes the case study approach one of the most powerful research designs. In this study, the use of documents and records, semi-structured interviews, the use of a checklist at the end of the semi-structured interviews, participant observation of the multi-disciplinary meetings and description of children's case studies seemed to be the most appropriate sources of data collection.

Use of documents and records

Policy documents and minutes of multi-disciplinary meetings highlighted the statutory and bureaucratic requirements for the provision and delivery of services for children under 5 with special educational needs in the three case study authorities whereas the other sources (participant observation of the multi-disciplinary meetings and the children's case studies) made scant reference to such requirements.

When I was designing the research I hoped to gain access to the records of pre-school children with special educational needs in the three case study authorities and to select some 'typical' cases, that resulted in contact between education and social work staff for in-depth investigation in order to be able to make a comparison among these cases. However, as will be further explained in the last section of this chapter, access to the clients' records was denied in all authorities on grounds of confidentiality issues and the children were chosen by the professionals themselves.

Semi-structured interviews

One of the advantages of personal interviews is that the interviewer can explain the purpose of the study, discuss the interview design and respond to any questions an interviewee may have.

'In a questionnaire, if the subject misinterprets a question or records his responses in a baffling manner, there is usually little that can be done to remedy this situation. In an interview there is the possibility of repeating or rephrasing questions to make sure that they are understood or of asking further questions in order to clarify the meaning of a response' (Seltiz et al, 1974:242).

Thus, an additional advantage of this method is its great flexibility. The interviewer not only can listen to responses but can also observe the respondent during the interview. 'Facial expressions, body language, mood, and other observable expressions can prove to be very valuable in understanding the totality of the interview' (Adam & Schvaneveldt, 1985:214). The personal interview provides greater opportunity to evaluate the validity of the information by observing the interviewee's non-verbal behaviour toward replying to the questions. Moreover, a face-to-face interaction can be instrumental in establishing rapport and motivate the respondent to supply accurate and complete information. Another major advantage of the interview is that it allows great control over the interview situation. For example, an interviewer can ensure that the interviewees answer the questions in the appropriate sequence or that they answer certain questions before they are asked subsequent questions.

The two major disadvantages of the interview are that it is time-consuming and has high cost. The actual interview session usually takes one hour but the interviewer may have to spend a considerable amount of time and money in travelling. As far as the time is concerned, when the interview is tape-recorded, the interviewer may have to spend a good deal of time in transcribing it.

Types of interview design

There are three types of interview design : a) the structured interview, b) the semi-structured interview and c) the unstructured or in-depth interview. The completely structured interview is one in which the questions, their wording, and their sequence are fixed and are identical for every interviewee. The reason for this is to ensure that variations between responses are attributed to the actual differences between the respondents and not to variations in the interview. In the semi-structured interview the interviewer has prepared a set of questions in advance, but is free to

'modify their order based upon his/her perception of what seems most appropriate in the context of the "conversation", can change the way they are worded, give explanations, leave out particular questions which seem inappropriate with a particular interviewee or include additional ones...' (Robson, 1995:231).

In the unstructured or in-depth interview the interviewer is guided only by a central purpose and topics that should be covered, but, no pre-specified set of questions is employed. The interviewees are encouraged to relate their experiences, to describe

whatever events seem important for them, to offer their own definitions of their situation, and to reveal their opinions and attitudes as they see it (Nachmias & Nachmias, 1992).

In the following paragraph the rationale for choosing the second type of interview will be given.

Semi-structured interviews are valuable when the researcher is interested in knowing people's beliefs, attitudes, values, knowledge, or any other subjective orientations. The more exploratory the purpose of the research, the greater the need for allowing the respondents to answer more in their own terms and for flexibility in determining the wording of the question, the sequence of the questions and the amount of probing used (Seltiz et al, 1974 ; Brewer and Hunter, 1989). This method appeared to be ideal for this study as it fulfilled the following requirements of the research design : the necessity of focusing on those people involved with the case-study children; the significance of offering to the interviewees the opportunity to describe their own experiences and elaborate on answers which seemed likely to provide more data. The latter was also the reason for using open-ended questions rather than rigidly structured ones. Partial structure was, however, necessary because some measure of consistency amongst the responses as a basis for comparison was desired.

Semi-structured interviews were carried out with education and social work staff working in the three case study authorities as well as with a limited number of other people who participated in the multi-disciplinary meetings (representatives from the health department and from voluntary organizations) and with the parents of the case study children.

Participant observation

A major strength of this technique is its directness. You do not ask people about their views, feelings, beliefs or attitudes but you watch what they do and listen to what they say. As Robson (1995) rightly state this directness contrasts with, and can often usefully complement, information obtained by other methods. 'Interview and questionnaire responses are notorious for discrepancies between what people say that they have done, or will do, and what they actually did or will do' (Robson 1995:191). These inherent problems with reliability and validity of such data can arise from deficiencies in memory and the wish to present oneself in a favorable light. Another main advantage of this method is that it studies social processes and social actions in context. This is very important because human behaviour is greatly influenced by the setting in which it occurs. The physical setting as well as the internalised notions of norms, values, roles, traditions and actions are important contextual variables. Through observation, the researcher learns about behaviour, and the meanings associated with those behaviours. (Finch, 1986; Bryman 1988; Marshall & Rossman, 1989).

One major issue concerning this technique is the extent to which an observer affects the situation under observation. However, as Robson (1995) argues there is the lingering problem of how can the researcher know what the behaviour would have been like if it had not been observed ? The researcher observed five multi-disciplinary meetings in the two case-study authorities which had formal arrangements and perhaps her attendance at these meetings inhibited the meetings or otherwise altered their procedures. By attending the meetings, however, she could gather a sense of the atmosphere and gather further

insight into the process of the meetings : the institutional context, the physical arrangements and the procedures.

When the research was designed the possibility of using an extended participant observation approach was ruled out. The reason for this was that such an approach was considered to be inappropriate in this research because of the nature of the data to be collected. Collaboration between education and social work staff in assessing children's special educational needs was just a small part of the everyday work of both groups of professionals and to take part generally in the life of these two groups would have required much longer time. Thus, it was decided that it would be more useful to restrict this technique in the observation of the multi-disciplinary meetings.

The researcher attended these meetings with a pre-prepared schedule setting out what exactly she wished to observe and what type of notes she needed to take. Specifically, attention was paid to the following things : **space** (who sat where, where the meeting took place and the extent to which individuals moved towards or away from others), **actors** (the number of participants, occupation, status) **goals** (more details about what participants were attempting to accomplish), **acts** (how the meeting started, developed and finished, the sequence of events which involved actors' behaviour: who spoke with whom, what was done and how was it done as well as feelings), **the behaviour of the actors** (interaction between education and social work staff : verbal and non-verbal behaviour, how the education representative interacted with the social work representative; whether they seemed to have a friendly, neutral or unfriendly relationship; whether they respected the opinion of the others ; whether they disagreed in anything and

if so what this was; whether they seemed to have equal power and whether there was a dominant individual in the meetings; how the other actors influenced the relationship of the education and social work staff ; whether the parents and/or health representative influenced the relationship between social work and education department staff and if so, in what ways) and **outcomes**, (whether the actors accomplished their goals, their plans for future actions as well as their behaviour and feelings and, lastly, whether they seemed to be satisfied from the meeting and the outcome).

According to Denzin and Lincoln (1994) there are five dimensions of variations in approaches to observation. First, the researcher's role can differ in terms of '*participateness*', which means the degree of the researchers' actual participation in daily life. There are three types of observation. Full participant observation or '*the complete participant*', partial observation or '*the participant as observer*' and onlooker observation or '*the complete observer*'. However, the most commonly used type is 'partial observation or participant observation' as the researcher wants to find out more about a particular activity, or feels obliged to participate in order to meet the demands of reciprocity. Typically, such interaction is highly informative and informal. The second approach was adopted, that of participant as observer or participant observation when the researcher attended the multi-disciplinary meetings. More specifically, permission was asked from all the people who participated in these meetings well in advance and it was made clear both to the professionals and to the parents of the children discussed in these meetings that the researcher was there as an observer. The purpose of the research was explained to them. The researcher had the chance to speak briefly to the professionals and to the

parents before the meetings and to ask for clarification in the end of the meetings but during the meetings she did not communicate verbally with any of the people who attended these meetings.

Second, the researcher's role can differ in its '*revealedness*' or the extent to which the real purpose of the study is known to the participants. At one extreme is full disclosure and full explanation while at the other extreme is complete secrecy and/or false explanations. As noted earlier, a fairly detailed explanation was given to the participants about the purpose of the research, both in written form and verbally, as well as a contact number in case that they needed further clarification.

Third, the researcher's role can vary as to its intensiveness and extensiveness with regard to the duration of time spent in the setting and the duration of the study over time. It can be a single observation, it can be limited observation that lasts for an hour or so or long-term and/or multiple observations that last months or even years. Both the duration of time spent in the setting and the duration of the study over time were short. The researcher observed multi-disciplinary meetings that took place during the period in which the semi-structured interviews were conducted (attended four meetings in each authority, each of which lasted approximately one hour).

Finally, the researcher's role can vary in terms of focus of the observations. The study may have a narrow focus, where a single element or component in the setting is observed, or it may have a broad focus, where a holistic view of the whole setting and all its elements is necessary (Finch, 1986; Bryman 1988; Marshall & Rossman, 1989).

Use of checklist

A checklist was used at the end of each semi-structured interview as another supportive or supplementary technique to collect data. The checklist format was used as a quick means of acquiring a range of information which had been asked for during the interview. Thus, the checklist was mainly used as a check on the reliability and validity of the findings and was, therefore, a part of the attempt for triangulation. It was also designed to provide some information on perceptions of the assessment process, information which would have been unwieldy to obtain in question form. The checklist explored the following areas: factors that facilitated inter-professional and inter-agency collaboration, factors that inhibited inter-professional and inter-agency collaboration and the advantages of multi-disciplinary teamwork.

Use of children's cases

As already explained, the individual person as the case is the most commonly used type of case study. 'A simple, single case study would just focus on that person but more complex, multiple case studies might involve several such individual cases' (Robson, 1995:146). For the purposes of this research, the study of several cases of pre-five children with special educational needs was necessary. Six cases of children in each of the three case study authorities were studied. This included semi-structured interviews with the education and social work staff who were involved with the children and with the children's parents.

Design of the questionnaire in the postal survey

After reading the basic literature on the research topic, approximately four or five months after the researcher started her Ph.D, she arranged to meet education and social work staff involved in the assessment of special educational needs of young children in two authorities in order to get some first-hand information about the proceedings used, to discuss with them what she was planning to do and get some feedback and suggestions from them. The educational psychological service and the social work centres were contacted and meetings with practitioners who were working with children with special educational needs were arranged. This was a very pleasant and useful experience, as the researcher was warmly welcomed and given some helpful feedback concerning issues that needed further investigation as well as specific questions and terminology relating to the postal survey. The majority of the professionals claimed that the research was very timely as the Children (Scotland) Act 1995 required closer inter-agency collaboration in the assessment of children with special needs.

Having defined the focus of the study and decided about the overall research design, the researcher considered what type of questions to use in the postal survey. There are two types of questions: open-ended questions and multiple-choice questions. In open-ended questions, the respondent is free to offer information in an unstructured manner whereas multiple-choice questions force the respondent to choose from two or more fixed alternatives. As the latter type of questions contributes to a higher response rate, the researcher decided to use it for the first phase of the research and for this reason the discussion below is limited to it.

This question format allows the respondent to answer questions by checking categories. A choice between "yes" and "no"; the use of scale items which ask the respondent to indicate the degree of agreement or disagreement or importance, (i.e. very important, important, not so important, of no importance) combined with a very short response are common ways in which the respondents are asked to respond. The researcher often supplies the respondent with a category such as "other" to allow him/her some latitude in terms of reference and in this way permitting some individuality in response while hopefully getting at what is truly most significant for the respondent. Adams & Schvaneveldt have identified five major advantages of the multiple-choice questions :

- 1) Ease of completing the questions
 - 2) Brevity of response time
 - 3) Specification of the frame of reference for the subject
 - 4) Promotion of objectivity
 - 5) Ease in scoring, coding, and tabulation'
- (1985:203).

In the postal survey all the above mentioned ways of asking questions were used. More specifically, in the first three questions the respondents were instructed to answer first with a "yes", "no" or "I do not know" and then to add some information according to the answer that they have given (See Appendix 2.1.). In the remainder of the questionnaire the technique of scaled items was used and the respondents were asked to tick either one or more boxes as appropriate. After the list of the questions some space for comments was left because as Moser & Kalton argue this 'can also be an incentive, for it allows respondents to write what they want rather than simply answer the surveyor's questions'

(1979:264). Robson (1995) offers the following suggestions for producing a high quality questionnaire and ensuring a high response rate : a) Clear type-set and filter questions clarify the structure of a questionnaire, b) instructing respondents to record their answers by placing ticks in boxes appears to promote clarity and c) as the respondent becomes more at ease with the questionnaire while it is being completed the most difficult questions should come towards the end as this also encourage completion and return. All these recommendations were used in designing the questionnaire.(See Appendix 2.1.).

Pilot of the postal survey

When the first draft for the postal survey was completed the researcher contacted the professionals that she had already met and asked them to participate in the pilot study for the postal survey. The researcher also asked them to introduce her to other professionals involved in the area in order to ensure an adequate number of people for this phase of the research. They were fortunately prepared to help and willing to do both.

The participants were verbally debriefed after completing the questionnaire and this exercise turned out to be extremely useful as several of them made valuable comments for improving the layout of the questionnaire and suggested some alternative ways of asking particular questions. Most importantly, they advised the researcher to add some further questions and to focus either on the assessment or on the records of needs process as it would be really complicated and time-consuming to examine both in the study. Their suggestions were taken seriously and it was decided to focus on the assessment process, since a study on inter-agency collaboration concerning the record of needs required

awareness of the assessment procedures which the researcher did not have. The pilot study also offered the opportunity to estimate the time required for the completion of the questionnaire. This information was very useful because it made it possible to inform the Directors of all Education and Social Work Departments in Scotland about how long it would take to complete the questionnaire and, thus, to increase the possibility of receiving a high response rate.

Negotiating access

In order to carry out the postal survey approval of the research was needed from the Association of the Directors of Education in Scotland (ADES) and from the Association of the Directors of Social Work in Scotland (ADSW). To this end, the Convenor of the Standard Training and Research Committee of ADSW was contacted as well as the Secretary of ADES in order to request access to all education and social work departments in Scotland (See Appendix 2.2.). Although this took a long time (almost three months), the two associations eventually gave their approval to approach the local authorities.

Sending out the postal survey and strategy adopted for the non-respondents

After completing the pilot study and obtaining permission from ADES and ADSW, the questionnaires were sent out to all education and social work departments in Scotland. The questionnaires were addressed to the Directors, who were asked to arrange for

someone involved in policy implementation to complete the questionnaire on behalf of their department (See Appedix 2.3.).

After two weeks the researcher started receiving back some questionnaires. During the first month, the response rate was quite low (approximately 4 questionnaires a week) and, for this reason, a reminder letter was sent to those education and social work departments that had not replied. Then more questionnaires were received but still not enough to ensure a satisfactory response rate (60%). In the third month a second reminder letter was sent only to those authorities from whom a completed questionnaire had not been received from either the education department or the social work department. At this point, a lot of questionnaires were received and by the end of the fifth month, a high response rate (84%) had been achieved.

Criteria for selecting the sites of the case study authorities

Initially the researcher thought of choosing two authorities as the sites of the case studies but the variety of different patterns of collaboration revealed by the postal survey pointed to the selection of more than two authorities (see questions 7-9 in the postal survey, Appendix 2.1).

As the researcher wished to examine each of the main types of collaborative arrangements (formal, informal and combination of formal and informal), three authorities needed to be selected. Another criterion for selecting the case-study authorities was their geographical location. The researcher wished to include at least one urban and one rural authority in order to explore whether the geographical location

influenced the development of specific patterns of collaboration as well as issues related to 'physical proximity'.

Before describing the characteristics of the three case study authorities which were selected, it is important to clarify how the researcher came to select them.

When the selection of the case study authorities was undertaken (three months after the questionnaires were sent out), the researcher was still waiting for some departments (usually the social work department) to reply. For this reason, many authorities were excluded from the decision-making. In addition, as it will further explained in the following chapter, the majority of the authorities mentioned that they had a combination of formal and informal collaborative arrangements and only one authority, which appeared not to have formal structures, was identified and this authority was chosen as the first out of the three case study authorities. Moreover, in only one authority did respondents from education and social work departments mention that they had only formal arrangements and this authority was chosen as the second out of the three case study authorities. Thus, choice was, in effect, limited to those authorities which had a combination of formal and informal arrangements. It was difficult to choose between them but one authority had an additional distinctive characteristic, that of planning to transfer its under 5 social work services to the education department and this authority was chosen as the third out of the three case study authorities. A more detailed description of the three selected case study authorities is given below.

Authority A had mainly formal collaborative arrangements and, more specifically, two generic multi-disciplinary teams (MDTs) for assessing the special educational needs of

children under 5 and both social work and education under 5 services. In geographical terms, this authority had a mix of rural and urban population (approximately 150.000 inhabitants) and was rather spacious in size.

Authority B had both formal and informal collaborative arrangements and, more specifically, MDTs dedicated to children with special educational needs, but only for specific areas in the authority. In addition, as explained earlier, this authority was going to integrate its social work under 5 services with the education department. In geographical terms, this authority was urban, fairly small in size and had a population of around 140.000.

Authority C had only informal collaborative arrangements. As with authority A, authority C had also both social work and education under 5 services, but as it will be seen in chapter 5 the social work department offered placements of only a few hours a week. In geographical terms, this authority was rural, widely spread and its population was much smaller than that of Authorities A and B (105.000).

As to the age group it was decided to focus only on pre-school children because not all selected authorities collaborated both for pre-five and 5-16 year old children and, thus, it would have been difficult to compare the collaborative activities between these authorities.

Access to the three selected case study authorities, responses and discussions with managerial staff about the practicalities of the project.

After selecting the sites of the case studies a similar letter was sent to the Directors of Education and Social Work in the three authorities asking them to participate in the next stage of the study and specifying what that entailed (See Appendix 2.4.).

Although the social work department in authority A gave a positive reply immediately, it took almost three months for the education department to reply. By contrast, in authority B, the delay came from the social work department. It was asked to complete a research evaluation questionnaire and three different meetings took place before a decision was reached. However, a joint reply from the two departments in authority C was received very quickly. There, it was suggested that the researcher should meet the designated persons well in advance in order to discuss the practicalities of the project. These differences provided a first indication of the way in which these authorities operated, indicating that the first two authorities did not collaborate all that closely (this turned out to be true only for authority A).

In terms of identifying children's case studies, none of the designated persons in the three authorities allowed access to the children's records on grounds of confidentiality. In authorities A and B, the designated persons from the education and the social work departments suggested that they should write to the professionals involved in that area to ask whether they were willing to participate, and those educational psychologists who were interested would be asked to select six cases from their caseload. Although, in authority C the designated persons proposed a similar strategy for the selection of the

participants in the study, in contrast with authorities A and B, it was the social work department staff ('Children Affected by Disabilities Team') who selected cases for the children's case studies. In order to achieve a high level of comparability between the three case study authorities, the researcher provided the designated persons with a set of criteria for selecting the case study children. These criteria are set out below. A summary of data on case study children is provided in Appendix 2.5.

Criteria for the selection of the case study children

<p>The children are :</p> <ul style="list-style-type: none"> • of pre-school age, preferable 3-5 years old • going to be assessed or have recently been assessed • have a range of special educational needs <p>Ideally :</p>			
	SLD (Speech and language difficulties)	MLD (Mild learning difficulties)	COMPLEX/MULTIPLE DIFFICULTIES
Children with a complex family situation	1 CASE	1 CASE	1 CASE
Children without a complex family situation	1 CASE	1 CASE	1 CASE

Sampling of the case study authorities

According to Robson (1995) the main use of sampling in case studies is to enable the researcher to make appropriate combinations of the following parameters: people, settings, events and processes. The sampling options of the study are given below :

Sampling options for the case study authorities

Sampling	Possible choices
People	<p>* Social work staff working in various settings (managers, day-care social work staff and social work practitioners who collaborated with educational psychologists in assessing the special educational needs of children under 5 (up to 5 professionals in each authority for both general interview and children's case studies)</p> <p>* Education department staff working in various settings (mainly educational psychologists and some education officers, nursery teachers in mainstream and special educational provision nurseries and home visiting teachers) who collaborated with social work staff for assessing the special educational needs of children under 5 (up to 5 professionals in each authority for both general interview and for children's case studies)</p> <p>* Representatives from health departments and voluntary organisations who participated in the MDTs</p> <p>* Parents of the case study children (6 children in each authority)</p>
Settings	<p>* Social work departments' venues : under 5 social work services and social work centres</p> <p>* Education departments' venues : psychological services, nursery schools and special educational provision nurseries</p>
Events	<p>* Observing MDTs for the assessment of special educational needs of children under 5</p>

Construction of the interview design for the semi-structured interviews, pilot study and interview procedure

The central principles of the models employed in this study were used as the basis for formulating the interviews schedule (see chapter 2). Open-ended questions were used for the construction of the interview design as they were more appropriate for this stage of the research (see section 'design of the questionnaire in the postal survey' for type of questions).

When the first draft of the interview design was completed it was piloted with the same professionals who had participated in the pilot study of the postal survey. The pilot interviews were conducted using the same procedures as those planned for actual interviews. There was a debriefing session after the interviews to enable the interviewees to ask questions or comment on the interview. These professionals made a number of interesting comments which were taken into account but, overall, their reactions were very positive. The most important feedback that it was received was that the interviews were too long and there was need either to cut the number of questions down or have two interview sessions with each participant instead of one. The participants comments were taken seriously and the number of questions were reduced and it was also decided to have two interviews with each professional. In the first interview, general questions about collaboration between education and social work staff in assessing children's special educational needs were asked whereas the second interview was focused on the children's case studies.

The first interview was divided into three sections. *The first section* incorporated three main areas : the role of the education and social work staff in assessing children's special educational needs; similarities and differences in the aims, values and perspectives of the education and social work staff; and advantages and disadvantages of inter-professional collaboration. *The second section* involved six main areas : description of the patterns of collaboration; advantages and disadvantages of these arrangements; information-sharing issues; relationships between education and social work department staff; training issues and suggestions. *The final section* was very short and attempted to explore further the factors that influenced inter-professional collaboration using a multiple choice format (See Appendix 2.6.).

The second interview with the professionals had only one section and referred to one or more children's case studies depending on how many cases each interviewee had selected from his/her caseload. The professionals were asked how they got involved with that particular child; how their relationship with the staff from the other department developed; how they had contributed to the assessment of this child's needs; frequency of contacts with the staff from the other department; the quality of collaborative relationships; and satisfaction with the outcomes of the assessment (see Appendix 2.7.).

The semi-structured interviews with the health and voluntary organizations representatives included two sections. *The first section* incorporated four main areas : the role of the health or voluntary organization representative; the role of the education and social work staff in assessing children's special educational needs; advantages and disadvantages of inter-professional collaboration; assessment of the performance of the

education and social work staff and the relationship between these two professional groups and suggestions for improving such collaborative relationship. *The second section* consisted of the same checklist used in the interviews with the professionals. (See Appendix 2.8.).

The semi-structured interviews with the parents of the case study children had only one section. In that section it was discussed the role of the education and social work staff in assessing children's special educational needs; advantages and disadvantages of inter-professional collaboration, assessment of the performance of the education and social work staff; and relationship between these two groups of professionals (See Appendix 2.9.).

In total, 95 interviews were conducted. These included the general and specific (children's case studies) interviews with the professionals and the parents of the case study children. Moreover, a number of informal interviews with education and social work staff in the under 5 services were conducted.

All the professionals were interviewed at their place of work and all the parents at their own home, at a time convenient for them. The interviews were all tape recorded and transcribed onto a word processor. Unfortunately, in two cases there was mechanical failure with the tape recorder.

Data analysis for the semi-structured interviews

The analysis of the semi-structured interviews has been carried out qualitatively, except in the case of the checklist, where a statistical programme (SPSS) was used. Although

computer analysis of the interview data (using programmes like Ethnograph, Hypersoft and Nudist) was considered, this was rejected because of small number of interviews with each group of professionals. Instead, a word processor was used to transcribe the responses to each question and professionals and authorities were identified by using number and letter codes (e.g. educational psychologist 1, Authority A, educational psychologist 2, Authority A and so on). This strategy made it possible to refer to all the responses of a given respondent as well as to all the responses to a given question by different professionals in different authorities. The latter was of great importance for data analysis since it made it relatively easy to make comparisons between different respondents. By inspection, common modes of response were identified and the answers grouped under appropriate headings such that every response was included. The initial groupings were then collapsed into a smaller number of major themes which formed the themes of discussion in the analysis chapters.

As far as the selection of quotations is concerned, this strategy made it possible to see how many respondents in the same or different occupation had given the same answer in order to be able to point out how many respondents held the same view (one, a few, a quarter, half, the majority, almost all or all). On some occasions, the reference is made to both education and social work respondents, whereas at other times, a distinction is made between responses of education and social work staff, between different professionals in social work department (e.g. day-care staff and social workers), or differences between the three case-study authorities, depending on the context and whether there were any noteworthy differences.

Ethical Considerations

In designing this research every effort was made to respect confidentiality and safeguard anonymity. This was achieved by adopting the following strategies.

Before the interview started, all the participants (both parents and professionals) were provided with a document which addressed all the related ethical considerations. This statement offered a detailed description of the procedures to be followed and their purposes (See Appendix 2.10.). It was also explained to all the participants that they had the right to withdraw their consent and to discontinue their participation in the research at any time. It is important here to emphasise that the designated persons in the three selected social work and education authorities had taken on the responsibility for distributing copies of the research design to all the professionals involved and for identifying those who were willing to participate in the research. In this way, it was possible to ensure that the interviewees participated of their own free will. At the end of the statement the researcher confirmed that all the information mentioned in the document was correct and signed it.

Moreover, it was stated that the names of the authority and the participants in the study (staff, clients, parents) would not be used in any document, notebook or tape. Most importantly, it was mentioned that the name of the authority and of the participants in the study (clients, parents, staff) would be kept anonymous. To this end, both the names of the authorities and of the participants of the study were changed. In addition, a detailed description of the geographical area of the case study authorities was avoided since it would have enabled the authority to be identified.

Summary

In this chapter it was argued that the purposes and research questions of this study were most appropriately served through the use of a mixed-method strategy with quantitative data collected in the first stage of the research by means of a postal survey and qualitative data gathered in the second phase via the use of case studies which incorporated a range of research methods (use of documents and records, semi-structured interviews, participant observation, use of checklist and case-study children). Differences between case-study authorities in negotiating access and ways of carrying out the study were described. This chapter ended with an account of how the sites of the case-study authorities were selected, and a discussion of anonymity for both authorities and the participants.

Having given a thorough account of the methodological considerations we can now shift to the postal survey analysis which, as explained earlier, forms the first stage of the study and offers an overall picture of the current patterns of collaboration.

CHAPTER 4

CHAPTER 4

PATTERNS OF COLLABORATION IN SCOTLAND

Introduction

This chapter concentrates on the description of current patterns of collaboration between education and social work authorities in Scotland in the assessment of children's special educational needs. Each question of the postal survey is analysed individually and at the end a summary of the findings is given. SPSS was used for the data analysis. Independent t-tests were carried out to test the null hypothesis that there were no differences between education and social work responses and a significance level of $p < .05$ was selected.

Before proceeding with the analysis, some issues arising from the response rate of the postal survey need to be discussed.

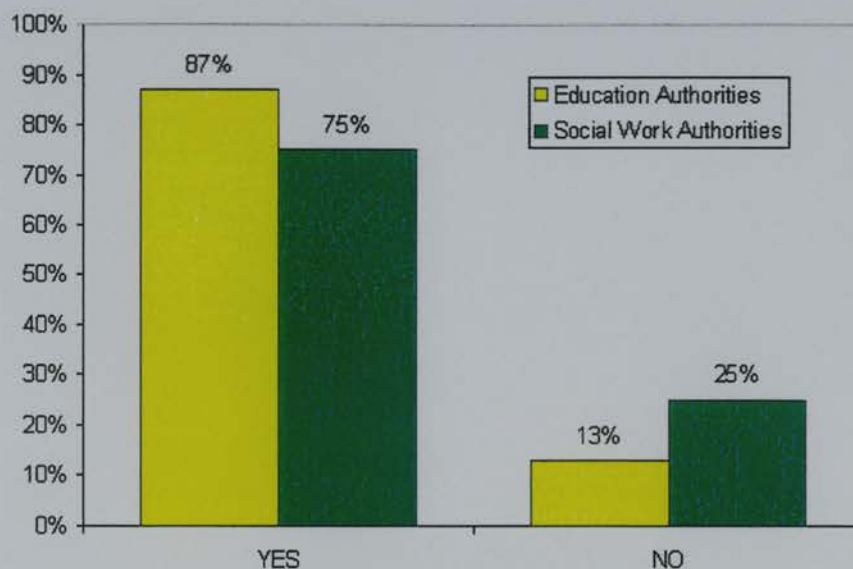
Although the postal survey had a very high response rate (84%), there was a considerable difference in the response rates of the education and social work departments. Thus, 31 out of the 32 education departments replied to the questionnaire whereas only 23 out of the 32 social work departments did so. This may be due to the fact that, since education departments are co-ordinators of the assessment and recording processes, education department staff were probably more interested in the subject area than social work staff and felt themselves to be under a greater obligation to reply to the questionnaire. The difference in the response rates may also have been due to differences in the structure of the two departments. Most education departments have a specialised section (psychological services) and specialised staff (educational psychologists) who deal with children with special educational needs, but very few social work departments have a

disability team or any other specialised team to deal with children with special needs. Thus, in some social work departments it might not have been obvious to Directors to decide who to ask to reply to the questionnaire. Support for this explanation comes from the fact that two questionnaires directed to social work departments contained the answer "I do not know" to factual questions such as "does your department use multi-disciplinary team meetings for assessing the special educational needs of children up to the age of 16?".

Changes to the local collaborative arrangements due to the Children (Scotland) Act 1995

The first three questions referred to the Children (Scotland) Act 1995 and were common to the education and social work departments.

Figure 1: Whether education and social work departments had established procedures for collaboration before the Children (Scotland) Act



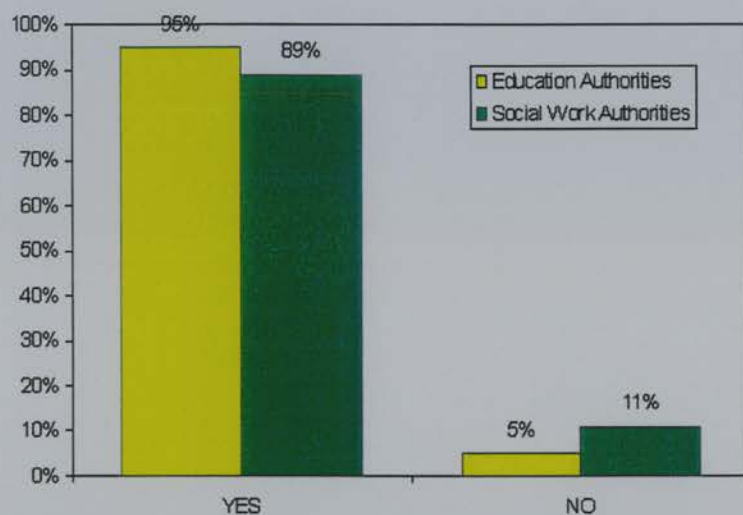
Inspection of figure 1, indicates that a higher proportion of education departments (87%)

than social work departments (75%) had established procedures for inter-agency collaboration before the Act. However, this difference was not statistically significant ($p=0.225$). This difference may be related to the fact that education departments are the leading authorities and, therefore, were more familiar with those procedures. A list of these procedures is presented below.

The procedures were: joint planning; joint assessments of children with special needs; involvement in the recording process; representation at multi-disciplinary meetings; and special procedures for children on supervision orders and in residential care. The most common responses were representation in the Recording process and representation at multi-disciplinary meetings.

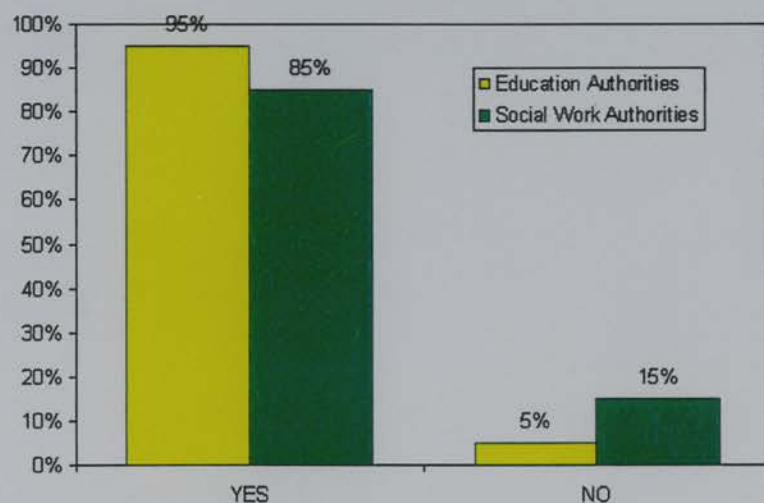
Most of the education and social work department respondents, who reported that they had not established collaborative procedures before the Act, commented that they established such procedures soon after the legislation was enacted. Inspection of the figure 2 below reveals that a slightly higher percentage of education departments (95%) have made changes after the Act than social work departments (89%). Again, this difference was not found to be statistically significant ($p=0.418$).

Figure 2 : Whether education and social work departments had established collaborative procedures after the Children (Scotland) Act 1995



The procedures and the most common responses were the same as those referred to in the previous question.

Figure 3 : Whether education and social work departments were planning to make further changes in their collaborative procedures due to the Children (Scotland) Act 1995



Again, a slightly higher percentage of education departments (95%) than social work departments (85%) planned to make further changes in their collaborative procedures in

Again, a slightly higher percentage of education departments (95%) than social work departments (85%) planned to make further changes in their collaborative procedures in response to the Children (Scotland) Act 1995. This difference was not statistically significant ($p=0.213$).

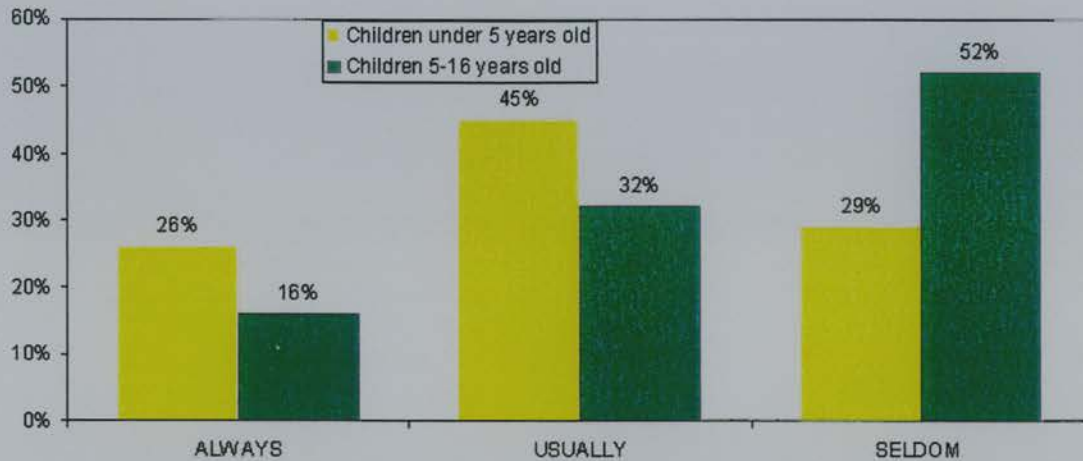
The following changes were reported: further development of formal collaborative arrangements or, where there were no formal arrangements, the establishment of formal arrangements; joint planning and review of the services offered to children; review of relevant terminology; up-dated guidelines for assessing children's special educational needs and integration of pre-five services. The most common replies were: further development of the formal collaborative arrangements; joint planning and review of the services offered to these children.

Where the respondents replied "no" to this question, they were asked to justify the reasons for doing so. Only one reason was given for not planning to introduce any changes in response to the new legislation. This reason was that changes were not thought necessary since the current practices were regarded as satisfactory.

Frequency of collaboration between education and social work staff

The above issue was addressed only to the education department staff because, as explained earlier, they are responsible for co-ordinating the assessments and, thus, it was up to them to determine whether collaboration would occur.

Figure 4 : Whether the education department staff collaborated often with social work staff



As can be seen in figure 4, education department staff collaborated more often with social work staff for assessing children under 5 than for assessing children aged 5-16. In relation to children under 5, the majority of the respondents reported that they either always (26%) or usually (45%) collaborated with social work staff whereas, for children aged 5-16, the majority of the respondents reported that they seldom (52%) did. This difference in percentages is due to the fact that many social work departments offer pre-five placements. It will later be shown that, in the three case study authorities, educational psychologists collaborate more with day-care staff in the social work departments (i.e. with day-carers who are usually nursery nurses) than with social workers.

Criteria used in deciding whether to collaborate with the other department

Figures 5-6 : Criteria used in deciding whether to collaborate with the other department

Figure 5

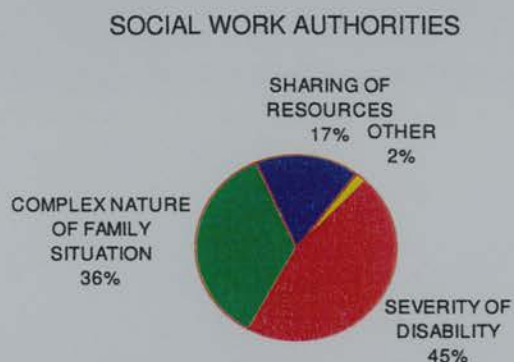
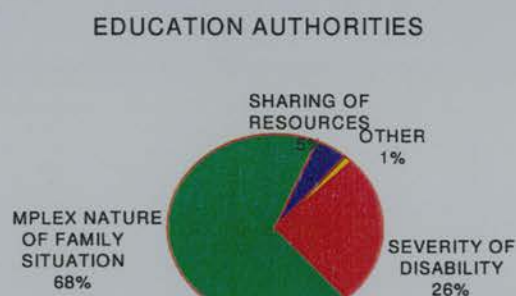


Figure 6



Differences in the responses of education and social work departments about their criteria for collaboration were statistically significant ($p=0.025$). Social work departments reported that their first priority criterion was the severity of disability (45%) and their second the complex nature of the family situation (36%) whereas education departments replied the other way round (68% complex nature of family situation and 26% severity of disability).

The most likely reason for this difference is that education department staff feel the need to collaborate with social work staff in particularly complex situations (e.g. where a parent is suffering from depression or some other psychiatric problem or in cases of drug abuse, intra-familial child abuse or violence) because social work staff have the knowledge and experience to deal with these problems. Conversely, social work staff feel the need to collaborate with education department staff, and particularly with educational

psychologists, when dealing with children with mild/severe learning difficulties (e.g. Downs syndrome or cerebral palsy) as they regard educational psychologists as experts in that field. As far as the 'sharing of resources' is concerned, 17% of the social work staff reported that collaboration involved sharing of resources whereas only 5% of the education department staff said so.

As can be seen in figures 5 and 6, a small number of respondents from both education and social work staff ticked 'other'. The other criteria mentioned were: 'looked after' children; children on supervision; children on the child protection register; and where there was previous social work involvement. The most common reply was previous social work involvement.

Types of special educational needs most often resulted in contact with staff in the other department

Figures 7-10 : Types of special educational needs most often resulted in collaboration

Figure 7

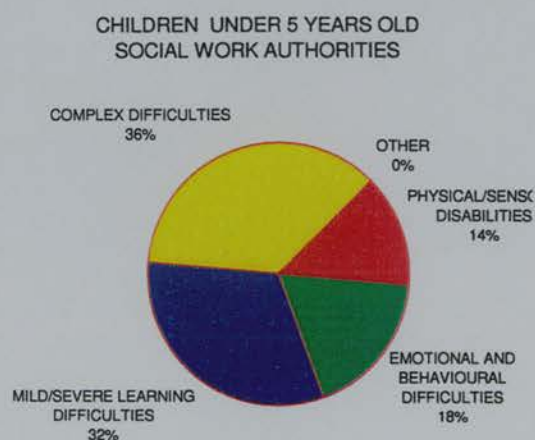


Figure 8

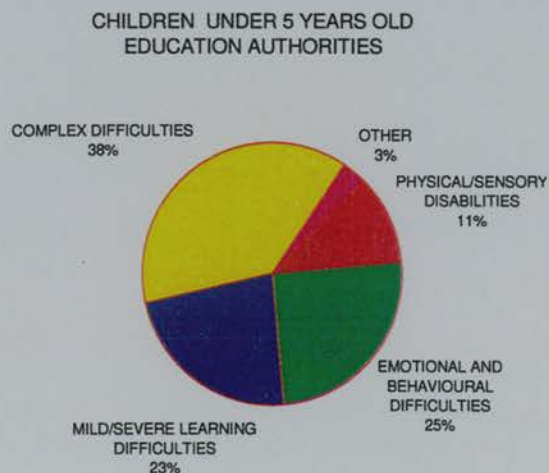


Figure 9

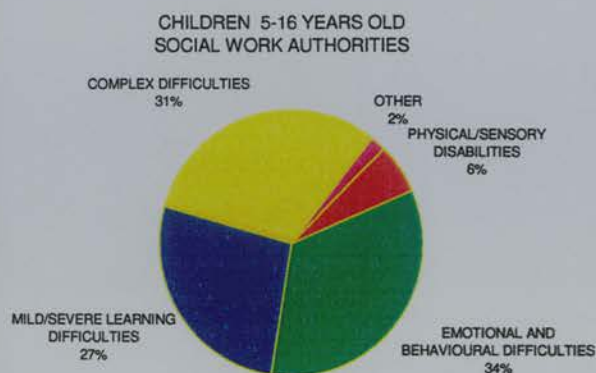
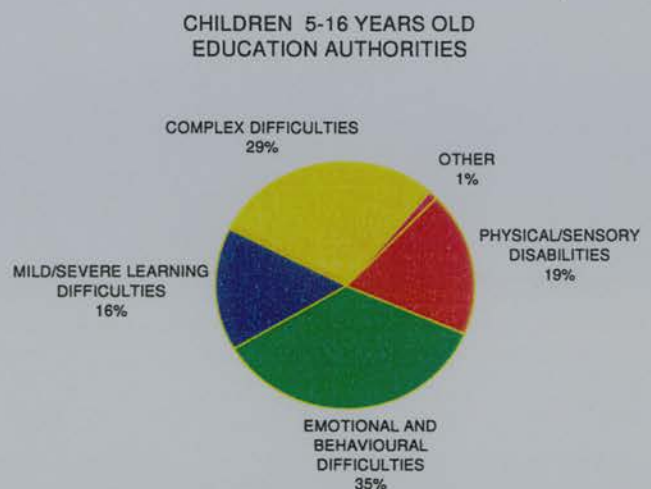


Figure 10



Inspection of figures 7 and 8 above reveals that, education and social work departments gave the same response in the first priority type of special educational needs and a similar percentage. However, there were differences in the rank order of other types of special educational needs. For example, social work departments placed children with mild/severe learning difficulties second while education departments placed children with social, emotional and behavioural difficulties second.

These differences in the responses of the two departments correspond with replies to the previous question. Social work staff more often felt a need to collaborate with education department staff when they were dealing with children with learning difficulties rather than social, emotional and behavioural problems, because of their lack of expertise in this field, whereas the education department staff more often felt a need to collaborate with social work staff when they were dealing with children with social, emotional and behavioural difficulties because they wanted to have as much information as possible about family history, problems and dynamics.

When the responses, for children under 5 and children aged 5-16 are compared,

differences in the types of special educational needs which give rise to collaboration are revealed. Although respondents from both departments ranked 'complex difficulties' first for children under 5, they ranked 'emotional and behavioural difficulties' first for children aged 5-16 (See figures 7-10).

One possible explanation for these differences is the fact that social, emotional and behavioural difficulties are not considered to be a problem for children under 5 but as children become older, their behavioural and emotional difficulties have implications for everyone concerned (other pupils, parents and staff). For this reason, education and social work staff have to work together more often in the case of older children with this type of special educational needs.

As can be seen in figures 8-10, a small number of respondents from both the education and the social work respondents ticked 'other'. Only one other type of special educational needs was mentioned, that of autism.

Range of professionals involved and identification of the key players

Figures 11-12 : With whom the respondents usually collaborate

Figure 11

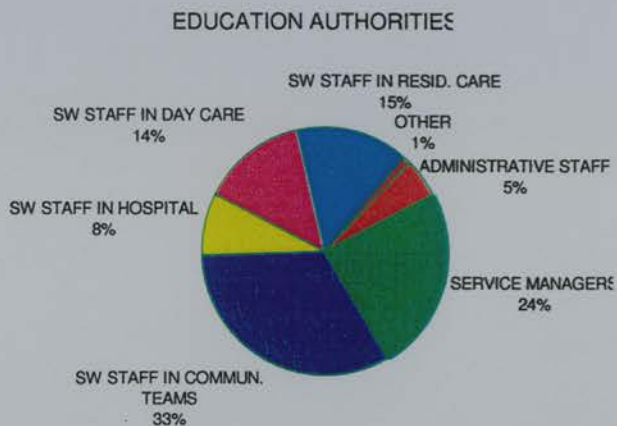
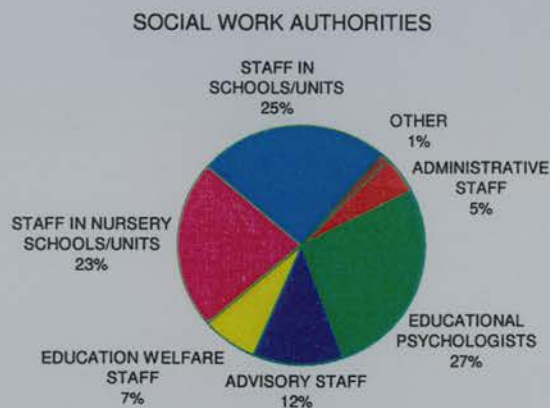


Figure 12



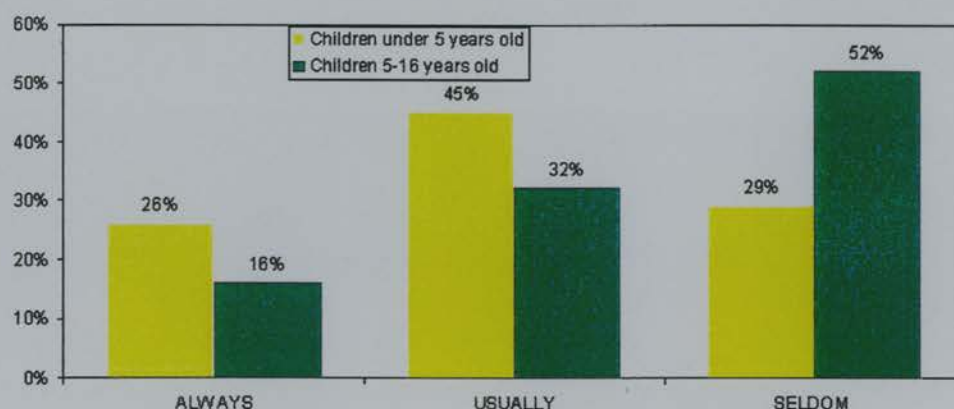
Respondents from education and social work departments were asked to indicate with whom they most often collaborated in the other department. Before analysing this question, it is important to emphasise that the questionnaire was completed by one person from each department and that this person was a manager and not a practitioner, except in small authorities where managers were also practitioners. This is very important because if practitioners had replied to the questionnaires it is very likely that different responses would have been given to this question. In the case studies it was found that professionals tended to collaborate with people who have similar status in the hierarchy (practitioners with practitioners and managers with managers).

As can be seen in figures 11-12, education department staff collaborated most often with social work department staff in community teams (33%) and with service managers (24%) whereas social work department staff most often collaborated with educational psychologists (27%) and with staff in nursery schools/units (23%).

A small number of respondents from both departments ticked 'other'. Only one other professional group was mentioned from the respondents in the education department, that of home visiting teachers, and only one other professional group was mentioned from respondents in the social work department, that of the resource officer, although this was included in the category service managers.

Use of local multi-disciplinary teams for assessing children's special educational needs

Figure 13 : Whether education and social work departments use local multi-disciplinary teams



Inspection of figure 13 reveals that eighty seven percent (87%) of the education departments reported that they used multi-disciplinary teams whereas seventy three percent (73%) of the social work departments gave this response. This difference was not found to be statistically significant ($p=0.114$).

The high percentage in both departments does not necessarily mean that collaboration between education and social work staff was frequent and/or extensive because the frequency of such multi-disciplinary teams and the range of types of special educational

The high percentage in both departments does not necessarily mean that collaboration between education and social work staff was frequent and/or extensive because the frequency of such multi-disciplinary teams and the range of types of special educational needs that they covered were not specified. As will be shown in the three case study authorities, collaboration between the two departments was limited in extent and poor in quality since educational psychologists collaborated with social work staff only under specific circumstances (mainly for children with complex/profound difficulties). More useful responses might, therefore, have been obtained if both departments had been asked to specify how often, if at all, they participated in meetings with staff from the other department as well as the range of special educational needs which were covered.

Identification of the participants in the multi-disciplinary meetings

Figure 14 : Who attends multi-disciplinary teams

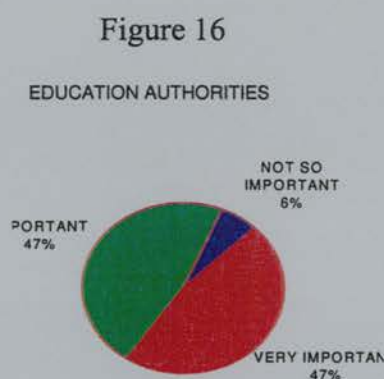
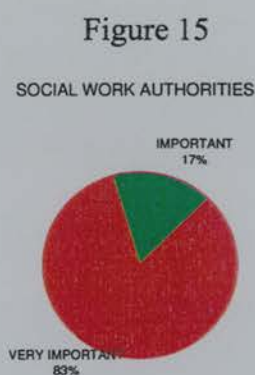
Professionals	Education Authorities (n=31)								Social Work Authorities (n=23)							
	Always		Sometime		Seldom		Never		Always		Sometime		Seldom		Never	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Parents	19	61	12	39	0	0	0	0	16	70	7	30	0	0	0	0
Co-ordinator of the MDT	25	81	6	19	0	0	0	0	18	78	5	22	0	0	0	0
Representative from ED	28	90	3	10	0	0	0	0	20	87	3	13	0	0	0	0
Representative from SWD	11	35	16	52	4	13	0	0	14	61	7	30	2	9	0	0
Representative from HD	16	52	13	42	2	6	0	0	12	52	9	39	2	9	0	0
Representative from VOG	2	7	4	13	19	61	6	19	1	4	2	9	15	65	5	22

In this question one might have expected that respondents from education and social work departments would have given the same replies as the question referred to the same meetings but, as can be seen in figure 14 there were some discrepancies between the responses from the two departments. However, none of these differences were found to be statistically significant (parents $p=0.538$, co-ordinator of MDT $p=0.834$, representative from education department $p=0.704$, representative from social work department $p=0.113$, representative from health department $p=0.924$ and representative from voluntary organisations $p=0.600$). The largest discrepancy referred to the presence of a representative from the social work department at multi-disciplinary meetings. A higher

proportion of social work respondents (61% said always and 30% replied usually) reported that a representative from the social work department was present at these meetings than did the education respondents (35% answered always and 52% replied usually).

Importance attached to inter-agency collaboration

Figures 15-16 : How important is to collaborate with staff in the other department



Although both professional groups said that inter-agency collaboration was important and none of the respondents replied that it was "of no importance", the social work respondents seemed to consider it more important (83% said it was very important) than the education respondents (47% of whom said it was very important). Analysis revealed that this difference was statistically significant ($p=0.008$). As will be shown in the final two chapters, this finding is also supported by interviews in the case study authorities, in which social work staff often stated that inter-agency collaboration was the only way forward and that they wished to work more closely with education department staff.

Satisfaction with the collaborative arrangements

Figures 17-18: How satisfied were the respondents with the existing patterns of collaboration

Figure 17

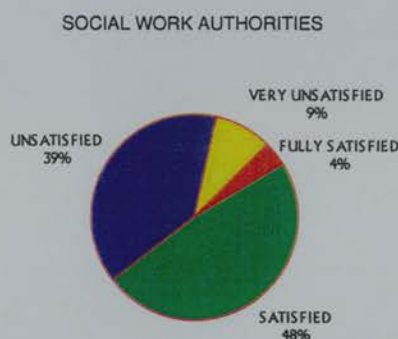
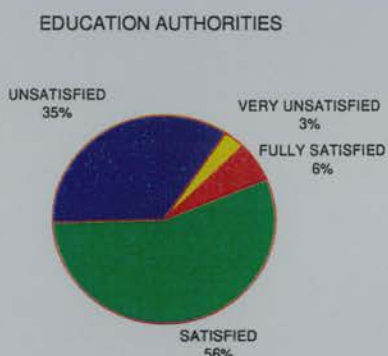


Figure 18



Inspection of figures 17 and 18 reveals that that a higher proportion of social work respondents seemed to be dissatisfied with the existing patterns of collaboration (39% said they were unsatisfied and 9% very unsatisfied) than education department staff (35% said they were unsatisfied and only 3% very unsatisfied). However, analysis revealed that this difference was not statistically significant ($p=0.384$).

At this point it is important to mention that the high level of dissatisfaction with existing patterns of collaboration corresponds with the reply offered by the majority of education and social work department respondents as to the further changes that they planned to make in response to the Children (Scotland) Act 1995 because, as stated earlier, one of the main changes that these departments planned to introduce were developments in their collaborative arrangements. As will be shown in chapter 6, this finding is also supported by data from the three case study authorities.

At the end of the questionnaire the respondents were encouraged to make further

really feasible. A few respondents commented that many education and social work departments were inward-looking and inter-agency collaboration needed a shift in attitudes while one respondent reported that it was difficult to achieve due to the fact that that authority was rural and widely dispersed. Lastly, another respondent mentioned that, because the authority was rather new, staff were unsure about the effectiveness of existing collaborative arrangements.

Summary

The postal survey revealed a number of interesting similarities and differences in the nature, quality and extent of collaboration in the assessment of children's special educational needs between education and social work authorities in Scotland.

A large number of education and social work departments had established procedures for inter-agency collaboration in assessing children's special educational needs before the passage of the Children (Scotland) Act 1995. Those authorities which had not done so before did so shortly after the legislation was enacted. Moreover, almost all education and social work departments planned to introduce further changes in policy and/or practice in response to the Act.

There was more frequent collaboration between education and social work staff for pre-school children than for older children since the social work departments offered placements for this age group and educational psychologists worked closely with the placement staff. Statistically significant differences in the responses of the education and social work departments concerning the criteria for collaboration were identified. Although there was a consensus as to the two most important criteria, for social work

departments the 'severity of disability' came first and the 'complex nature of family situation' came second whereas in the education authorities it was the other way round. The most common type of special educational needs that resulted in collaboration between the two departments referred to children with complex/profound difficulties.

The postal survey showed that the majority of the education authorities had formal collaborative arrangements for the assessment of children with special educational needs. However, this finding must be treated with caution since the frequency of such multi-disciplinary meetings and the range of types of special educational needs they covered were not specified. It was found to be common practice for parents, co-ordinators, representatives from the social work department and representatives from the health department to participate at these meetings whereas representatives from voluntary organisations seldom did so. Although both education and social work departments seemed to value inter-agency collaboration, analysis revealed that there was a statistically significant difference in their responses with social work staff attaching greater importance to inter-agency collaboration than education staff. Although a higher proportion of social work respondents seemed to be dissatisfied with the existing patterns of collaboration, this difference was not statistically significant.

As stated in the previous chapter, the postal survey not only resulted in a national picture of existing patterns of collaboration between education and social work authorities in the assessment of children's special educational needs, but also made it possible to select sites for the case studies which comprised the second phase of the research, and subsequently, to carry out in-depth research in these authorities.

CHAPTER 5

CHAPTER 5

EARLY YEARS SERVICES

Introduction

This chapter begins with an examination of the main issues related to pre-school provision in Scotland. In order to be able to compare early years provision in the three case-study authorities it is necessary to make reference to policy relating to pre-school provision and in this way to integrate policy into practice. The first section, therefore, attempts to put pre-five provision into context and to describe the various under 5 services, whereas the second section proceeds to a brief description of the case study areas and to a comparison of their early years services.

SECTION A: POLICY ON PRE-SCHOOL PROVISION

Historical development of early years provision

While Scotland has its own policy-making procedures for the provision of services for children under 5, it shares its organisational framework with the rest of the UK. Since the origins of free nursery education in the early years of this century, successive governments have argued for nursery education, but have seldom managed to fund it (Watt, 1997). Legislation was not mandatory and even after the Haddow Report (1933) the emphasis was on the physical and moral development of working class children. The

Plowden Report (CASE 1967) recommended that the early education should not start until the age of three and that it should be part-time. The 'White Paper Education: A Framework for Expansion (1972)' approved the report and recommended the provision of nursery education for 50 per cent of three year old and 90 per cent of four year old children. However, subsequent cuts in government expenditure did not allow this vision to materialise. The 1981 Education Act and 1981 (Scotland) Act empowered but did not require local authorities to provide pre-school education. Under the Children Act 1989 and the Children (Scotland) Act 1995, local authorities have functions as providers and also as regulators of early year services. They are required to provide day-care services for children "in need", and empowered to provide such services to other children too (see chapter 1). They regulate day care services for children under 8 through registration and inspection, and they have to exercise their inspection powers at least annually. However, the current regulatory framework has been reviewed and the government has set out in the White Paper 'Aiming for Excellence' (1998) its intention to create a new regulatory body, the Scottish Commission for the Regulation of Care, which, in addition to registration and inspection of residential and home-based social care, will also regulate non-residential care. In the consultation paper 'Regulation of early education and child care' (1999) it is explained that the main reasons for this review are, first, that the regulatory frameworks are very old (Schools {Scotland} Code 1956 and the Schools Premises Regulations 1967) and, secondly, that there are discrepancies in the existing regulatory standards applied to provision in local authority schools and the private and voluntary sectors.

According to the Scottish Office Report (1997a) 'Education in Early Childhood: The Pre-school Years', in some areas '... the local authority has developed services to the point where it is able to offer places to all, or nearly all children in the pre-school year; and to a substantial proportion of three-year-olds as well' (par. 1.16:4).

In paragraph 1.18. in the above mentioned report, it is stated that the previous Government attempted to stimulate growth in pre-school education places by introducing parental vouchers. The vouchers could be redeemed with providers in the public, voluntary, private or independent sectors, provided they satisfied HM Inspectors of Schools that they were capable of offering a good standard of education but vouchers did not however guarantee places and, thus, although many parents received vouchers they were unable to find places to use them at. The Scottish Office Report (1997a) also states that there is evidence that vouchers have encouraged competition rather than co-operation amongst providers and that for these reasons the new Government announced that vouchers would be abolished in Scotland from the end of this school session.

Provision for pre-school children is a lively political issue and early education and care have been reviewed and changed, to some degree, in recent years. According to the Scottish Office (1997a) around 53% of 4 year olds and 20% of 3 year olds were attending education authority nursery schools and classes in 1996 (38% of the total population of 3 and 4 year olds). Since January 1997, local authorities have opened over 180 new pre-school education settings, and these, together with new centres opened by the private and voluntary sector, have made a significant contribution to the supply of places. However, there are still shortages of full-time provision in many authorities and a lot of parents are

forced to use more than one kind of provision. These alternative services are usually playgroups, children's centres, childminders or even private nurseries (Craft, 1997; Powney, 1995; SCRE, 1995).

The following contrasting forces have impacted upon the aim of central and local government to provide a holistic service for pre-school children and families.

According to the Central Statistical Office (1995), the proportion of children aged 0-16 in the general population, in the UK, currently about 20% has fallen from 25% in 1961 and is predicted to fall further until the year 2021, when this age group will consist of only about 18% of the population. In contrast, the proportion of the population aged 65 and over has risen from 12% in 1961, and will continue to rise to about 20% in the year 2021. As Sutton (1997) demonstrates these demographic changes may reduce the political priority accorded to children's services in the near future and 'squeeze' both central and local government spending on children, which is already held to be less favourable than spending on elderly people. However, on the other hand, a combination of some other demographic changes will create pressure for an extension of existing early years provision. These demographic changes are the significant increase in the number of lone parents (1 in 5 of all families) {this group of people belongs in the high priority category for providing pre-school provision}, the dramatic increase in women's employment as well as increase in the number of children in poverty (30% of the poorest tenth of British population) (Joseph Rowntree Foundation, 1995; Central Statistical Office, (1995).

Current provision for pre-school children

There are many different forms of early year services, some organised and funded by local authorities and others run by the private or voluntary sector with or without support from the local authority. However, as Powney (1995) notes the situation is further complicated by partnerships between some of these parties.

In addition, local authority provision is usually divided into predominantly 'care' services such as children's centres, family centres and day nurseries which tend to be the responsibility of the social work departments, and predominantly 'education' services such as nursery schools and classes, which are the responsibility of the education departments. These two types of provision have different entry requirements, different charging structures and, most importantly, they are based on different philosophies and rationales and, thus, on different curricula or programs of activities (in sub-section 'co-ordination of the early years provision' we will come back to this issue and suggestions for a way forward will be made). As a consequence, children and their families may experience great differences in provision depending on where they live, parent's income, how old the children are or how hard the parents 'push' for services.

The remainder of this sub-section concentrates on the description of the early years services provided by the public, voluntary and private sectors.

Day-care services

Children centres, family centres and day nurseries

Although the children centres, family centres and day nurseries operate on the same principles and values and function in similar ways, the main difference between them is that the children centres usually provide for children from early months up to the age of five whereas family centres and day nurseries usually provide only for children aged 2-5.

Although all the above mentioned settings offer services for children and their parents, the special focus of the children's centres and day nurseries is on the former whereas the focus of the family centres is on the latter.

Most day nurseries in Scotland are managed by the local authority social work departments, although recently a few authorities have vested responsibility for all early year services in the education department. These differences in management and funding are largely due to differences in historical background and geographical location of the authorities (Statham & Read, 1998).

Day nurseries usually provide education and day-care for children from birth until school entry. They are usually open 48 to 52 weeks per year, mainly between the hours of 8.30 and 17.30 and offer both full-time and part-time sessions (morning and afternoon sessions). Parents are usually encouraged to become directly involved in these settings and they receive flexible support from the staff. Priorities for admission are given to the following categories/groups: children with special needs, social isolation, parental illness and children at risk, parent working or in full/part time education, children who receive respite care. Day-care placements operate a 'key worker' system, where on admission

each child is allocated to a key worker (usually a nursery nurse but for children with special educational needs it can be a special duty attendant) who becomes the child's primary carer in the placement. The staffing ratio recommended by the 1995 Children (Scotland) Act is 1:6. However, children with severe disabilities or complex difficulties have a ratio 1:1. The staff in the day-care placements are mainly nursery officers (nursing nurses) and the qualifications of the managers differ, the most common case is to have nursery nurse qualification and some additional training such as special needs training or social care training and occasionally to have social work qualifications too (Powney, 1995; Children Services Plans, 1998-2000 from a number of Scottish local authorities).

The under 5 social work services have the following five aims: To develop a curriculum which promotes the physical, social, emotional and intellectual development of the children; to offer a package of care to meet individual needs; to offer an environment which is committed to promoting equal opportunities; to develop and promote the use of local community resources; and to develop effective communication links with parents.

The children centres usually provide the following six services: day-care facilities for children of working parents or those in full/part time education; socialisation for children; integration of children with special needs; links with social work, health and education department; work in partnership with parents in providing services; and offer support for parents in caring for their children.

The family centres usually offer six additional services: Family work service to improve parent-child interaction; independent assessment of family functioning to inform future planning; respite care and social contact for parents; program of adult group activities;

program of holiday activities for 0-11years; and provide opportunity for other local agencies to meet and exchange information (Children Services Plan, 1998-2000 from a number of Scottish local authorities).

Playgroups

Playgroups were initially set up informally by groups of parents who wished to provide opportunities for their pre-school children to mix with other children. Most playgroups run on a part-time basis and cater for children aged from a few months up to five-year-old. Often parents pay a small contribution for their child's attendance in order to meet the costs of the group. Most playgroups are run by groups of parents with parent led committees, although some may be owned by individuals or supported by voluntary organisations or the local authority.

Children's homes

Children's homes are residential care settings mainly providing for school age children as younger children are often placed with foster parents.

Private and voluntary nurseries

Private and voluntary nurseries provide day-care services with educational opportunities for pre-school children on a commercial basis. However, some voluntary day care services are supported by the local authorities or from their own funds and request from

parents only a small contribution. They are usually open all year round and offer both part-time and full-time services.

Other services

A number of other pre-school services are also available. They are often play oriented and may support the parents as well as the children. These services are: adventure playgrounds, crèches and 'drop in' centres, parent and toddler groups, hospital schemes, holiday schemes, out of school clubs (for those children who attend nursery classes in primary schools) and toy libraries (Pugh, 1988; Clark, 1991; Powney, 1995).

Education services

Local education authorities provide educational services for pre-school children (mainly for 4 year old children) but there are also private nursery schools and classes.

Nursery classes and schools

Nursery classes are attached to primary schools and provide mainly part-time educational services for 3-5 year old children. The head-teacher of the primary school is responsible for the nursery class and these placements are staffed with nursery teachers and nursery nurses. Nursery classes open during the school year and attendance is free. Additional services may be offered to children with special needs such as home visiting teaching lessons.

Nursery schools are similar to nursery classes, except that they are self-governed settings with their own head teacher, responsible for the nursery school and they are mainly staffed with nursery nurses.

Costs and benefits of pre-five provision

Although some parents pay for childcare services, most provision is funded by local authorities whose funds come from central government grants supplemented by council tax receipts. Scottish local authorities invest millions of pounds to offer early year services but still the situation remains that access to facilities is not equal between local authorities.

There is no doubt that pre-school provision is costly, but, the long term benefits for parents and children outweigh its costs. Pre-school settings provide the first opportunity for children to make significant relationships outside the family circle. More specifically, a recent study carried out by the Scottish Council for Research in Education (1995) found six main benefits of provision for pre-school children:

‘Allowing children to socialise with other children; promoting the general all-round development of children; promoting the educational development of children; preparing children for school; giving children access to new equipment, experiences, or resources; and providing a safe and caring environment’ (1995:1).

The same research study found the following four main benefits for parents: Allowing parents to work; allowing parents to study; allowing parents to have some respite from

the relentless demands of looking after young children; and improving the quality of the time parents and children spend together (SCRE, 1995).

Provision for children with special educational needs

'Provision for special educational needs is made through mainstream funding from central Government to local authorities covering the whole of school education, and it is for education authorities to ensure that this funding is effectively split between pre-school, primary and secondary education. In addition, a sum of nearly £1m on an annual basis was transferred with effect from this year from the pre-school programme into general local government financial support, to offer additional resources towards meeting the special educational needs of young children. Local authorities have a specific statutory duty to provide for the special educational needs of children who have a Record of Needs, and also for the special educational needs of those who do not have one but only so far as this can be seen as part of their general duties for school education (Scottish Office, 1997a, para. 7.4:32).

SCRE (1995) study found that day nurseries and nursery schools were more likely than other providers to have children with the following types of special needs: physical difficulties; learning difficulties and/or social, emotional and behavioural problems. The same study also revealed that, although, many centres accept children with special needs they did not have trained staff to provide support for such children. Moreover, the

integration of children with special needs varies from complete integration to merely being in the same building as other children.

Co-ordination of the early years provision

While several practitioners have argued that improving the co-ordination of services is not a substitute for increasing provision, there are nevertheless strong arguments for making better use of existing resources, and for providing services that can respond flexibly to the needs of young children and their parents.

According to Sutton (1997) in the past agencies operated in isolation, confident that there was a close fit between their boundaries and those of adjacent agencies. Where agencies tended to share responsibility for a particular group of children, for example disabled children, some forms of collaboration emerged, which were sometimes resourced through joint finance. Often this collaboration took the form of joint teams, yet this was seldom based on joint assessment, but was opportunistic and generated by providers rather than purchasers of services.

In 1996, the Audit Commission published a report, which examined the co-ordination of child health and social services for children in need and urged better joint-strategic planning between agencies, better monitoring of effectiveness and joint service delivery strategies. However, a number of studies, including those of Powney, (1995) and Moss & Penn (1996), found that the pre-school provision was fragmented and uncoordinated, with different agencies tending to focus on only one aspect of children's needs (education or care as explained in sub-section 'current provision for pre-school children'). A few

local authorities have integrated all care and education services for pre-five children within one department, usually education (as will be shown in the second section of this chapter Authority B has done so). However, as the following quotation from a Report produced by the Scottish Office (1997a) argues such fragmentation of services is not helpful and changes in the early years provision need to be made :

‘the concept of integrated early years services has brought into sharper focus the question whether distinctions between ‘daycare’ and ‘pre-school education’ make sense. After all, it is argued, children do not suddenly stop learning when they move from nursery school to a childcare setting; and, conversely, it is clear that education is only effective when it takes place in a caring and safe environment’ (para. 1.11:3).

Although Section 19 of the Children (Scotland) Act 1995, does not address the basic split between pre-school day-care and education services, it does attempt to encourage local authorities and, particularly education and social work departments, to adopt a more co-ordinated approach, by requiring them to prepare, consult upon, publish and review jointly plans for all children's services. Local authorities were required to produce their first three years 'Children's Services Plans' by 1 April 1998. These will be reviewed annually and rolled forward each year. The Children's Services Plans

'should identify the current needs of the children and services provided in the locality, assess future needs, and identify how services should be changed or developed to meet these needs. It

must also include actions required and resources to meet the identified needs and outline the information which will be used to monitor progress' (Scottish Local Government Information Unit 1998a).

It is also important to mention here the requirement under Section 20 of the Act to publish information about services to children. Section 19 (2) indicates the services upon which plans must be prepared and published. These include services for children with disabilities provided under Sections 23 and 24, the provision of day-care under Section 27, and aftercare and training under Sections 29 and 30.

SECTION B : PROFILE OF THE EARLY YEARS PROVISION IN THE THREE CASE STUDY AUTHORITIES

Before proceeding with the description of service provision in the three case-study authorities, it is important to mention that accounts are based on the Children Services Plans produced by these three authorities. Differences in the extent of detail provided are attributed to the varying amounts of information provided in these documents (See chapter 3).

Authority A

General characteristics

Authority A has a population of around 150.000. The authority has a mix of rural and urban population. Around a fifth of the families in the authority are vulnerable as a result of poverty. There are both social work and education under 5 services.

Under 5 Social Work Services

There are four 'Children and Families teams' in the authority which provide a comprehensive range of services. Most of the referrals to the social work department, concerning children with special educational needs, come from health visitors. The social work under 5 services consist of two family centres (see sub-section 'current provision for pre-school children').

Under 5 Education Services

The authority has 12 nursery schools and 31 nursery classes. The children services plan state that the authority is committed to provide a nursery place for every child in their pre-school year. All the under 5 educational services follow Scottish Office guidelines with regard to the curriculum for pre-school children.

The education department provides a wide range of services for young children with special educational needs such as pre-school home teaching services, special classes in schools, language nursery and special nursery for children with developmental delay. In addition, the 'psychological services' receive around 400 referrals per year for children up

to age of 8, the majority of those concern children who may have special educational needs. The psychological services undertake a range of activities to allow the authority to meet its statutory duties such as the assessments of children with special educational needs and decision-making for the educational provision for these children. Information and/or advice is also offered to parents as well as to teachers concerning the education of these children.

Other Under 5 Services

Education Services support 37 playgroups for children over the age of two and a half. The council and the NHS Trust in Authority A were developing a 'Child Development Centre' within a relocated special school facility in the period that the fieldwork was conducted (March-Aug. 1998). According to the 'task group' for the Children Services Plan 1998-2000 this centre

'would offer a more effective use of resources as it would be able to provide one door into services for children from 0-19, incorporate multi-disciplinary assessment and service provision from the point of diagnosis or identification of need, and offer excellent potential for parent involvement and out of term facilities'.

At this point it is important to mention that although the 'children services plan' stated that the child development centre would start operating by November 1998 when the researcher contacted a manager from the social work department in the beginning of 1999

he explained that the building was not ready and nobody was certain either when the building would start operating nor whether social work staff would be involved in the new multi-disciplinary team.

Authority B

General characteristics

Authority B is an urban, not widely spread authority. Its population is slightly smaller than Authority's A (approximately 140.000). The children services plan stated that the population profile is not biased to any particular age group, employment level, housing, education, crime, health care provision, levels of social deprivation, ethnicity and social work provision. This is all, generally speaking, like many other central Scottish authorities.

Recent changes in the management of pre-five services

In 1998 a decision was taken in Authority B to deliver its early years services through its education department. However, the idea of integration of pre-five services was not new and it was actually planned over two years previously. That position was supported by the Directors of education and social work department. In 1996 a joint paper was put to education and social work committees offering a combined view on the way ahead, including a commitment to report progress to respective Committees in early 1997. The joint report put to the respective Committees in November, 1996 stated that integration of early years services would have the following strengths :

'create one management structure, develop a joint equal opportunity policy, develop a joint admission policy, develop shared culture/philosophy/values, increase communication across services and valuing of each others' skills and expertise, develop staff exchange possibilities and shared supply list, reduce the stigma attached to social work provision and reduce the preciousness attached to educational provision'.

This report also included the following barriers/obstacles to the integration of the pre-five provision:

'Difficulties in harmonising differences in conditions of service as far as rates of pay, hours worked, annual leave and job descriptions are considered, possible staff resistance to do so, possible non co-operation of unions in relation to harmonisation of conditions of service, lack of shared culture/ethos, lack of trust between services, different legislative processes in both services, lack of career development opportunities for social work staff within the education service and prejudices from staff in both services about each others professional abilities' (Report prepared for the Directors' meeting held at 29th of January 1998 titled : Delivering early years services, Authority B).

In April 1998 the social work department budget for the under 5 services was transferred to the education department and the intention was that the management would change in August 1998. However, because the service manager in the social work department had to take on another responsibility this date was pushed two months earlier (one month

before conducting my fieldwork). Responsibility for consulting the staff and trade unions was left with the Head of Children and Families Services (social work department) and Head of Schools Management (education department).

It is pertinent here to discuss briefly how well informed the education and social work department staff were about the integration of the early years services, the objectives for the transference as well as about their reactions to it.

The majority of the education and social work respondents appeared to be ill-informed regarding both when the decision for such change was taken, its objectives and when the transference would take place. Although the majority of the respondents reported that they were aware of an on-going discussion of possible integration of the early years services, only two professionals from both departments said that their manager had informed them about the exact date of this transference. Most of the education and social work department staff noted that they were informed about the transference from word of mouth, which included being informed by parents. As far as the rationale for the integration is concerned, most of the respondents reported that they were not certain about either who took this decision or why and, thus, that they could only make speculations. These speculations can be summarised as follows:

'We were involved in the meetings with the managers of the social work day-nurseries and the senior management team They were saying that it was in line with the policy decision to move towards an integrated pre-five service and be transferred to the management of the education. What they meant is that we all

come under the same umbrella, rather than services to be managed in two separate departments.'

'I think that it was an attempt to minimise the stigmatisation that is attached to the social work department in this authority'

'It was also influenced by government's recommendations for closer collaborative working'

'It was considered as good practice'

'It was thought that in this way there would be closer collaboration between the workers of under 5 placements and the home visiting teachers and especially the educational psychologists'

'It was thought that this would harmonise services'

'There are definitely issues of better value of money which means cost-effectiveness issues'.

Although most of the speculations of the education and social work department staff were right in terms of matching with the underlying thinking of the Committee, the fact remains that the practitioners were not adequately informed about the reasons for the integration. It would not be surprising, therefore, if the practitioners were indeed resistant to change since nobody informed them about the reasons and strengths of such decision and, how this change would improve existing practice. One reason that the managers did not do so is that they were not certain themselves about the future changes in the previous social work services as the following quotation demonstrates:

'There is a great upheaval in the education department at the moment because it is not definite how these previous social work

services will operate from now on. For example, it has not been decided yet if they will continue to have the same ethos and work in the same way ... Would the children with child protection issues and the children with special needs continue to be given priority or not ? We are currently in process of writing an agreement policy ('Service Level Agreement document')'
(Manager in the education department).

However, two managers were able to discuss possible changes in the previous under 5 services. They reported that they would possibly have to change the admission criteria because only children whose parents could afford to pay for their placement would be accepted from now on, except for children at risk or with special educational needs. As a result of this they expected that they would have to initiate a formal assessment for children who may have special educational needs at an earlier stage and the same applies for the record of needs because only in this way would the parents of these children not have to pay. Thus, an increase in the rate of the Records of Needs is most likely to occur in authority B in the near future. Moreover, the professionals would probably have to make attempts to change parental attitudes because if they were going to offer the same level of provision in all under 5 services the nursery schools should start getting more children with special educational needs and, this means that parents would have to approve this idea. Providing the same level of services would also probably mean that procedures would have to be established with the social work department for having a link social worker in each nursery school.

As the transfer of the under 5 day-care social work services to the education department had just taken place when the fieldwork was conducted (only one month previously) and no significant changes had yet occurred in the way that these services were operating their services are described separately.

Social Work under 5 services

They are eight Children and Families Teams in authority B and a new team, which would focus on children with disabilities, is in progress. As with authority A, most of the referrals to the social work department, relating to young children with special needs, come from health visitors.

The previous social work under 5 services include one children centre and six day nurseries. Immediately after the transfer of the day-care social work services to the education department, these placements were registered to receive pre-five education vouchers and the premises were inspected by the Inspectorate of Schools (the purpose of this inspection was to ensure that the quality standards for registration were met). According to a recent report produced by HM Inspectorate of Schools, these services issued regular, informative newsletters to parents and the parents were well supported. In all these placements the inspectors highlighted the following main points for action: the review of the curriculum and, more specifically, the need for starting to follow the Scottish Office guidelines with regard to the curriculum for pre-five's (The Scottish Office, 1997).

Education Services for pre-school children

The authority has 6 nursery schools and 24 nursery classes. All the under 5 educational services follow Scottish Office guidelines with regard to the curriculum for pre-school children. As in authority A, the education department provides a wide range of services for young children with special educational needs such as pre-school home teaching services, special classes in schools as well as two special schools. The psychological services offer support to children, young people and their parents as well as agencies involved with children and young people. This support includes contact with the child or young person, through consultation with teachers or parents.

Other Under 5 Services

In authority B there are two family centres. Although both family centres have the same principles and operate in a similar way they have two main differences. First, they are funded by different sources, one is jointly funded by Barnados and the Council whereas the other is jointly funded by the National Lottery Committee and the Council. The second difference is that the former has two part-time social workers whereas the latter does not have social work posts, although, it has counselling services. Interviews with the project leaders in both family centres revealed that many attempts were made to maintain close links with both education and social work department staff and that a large number of the referrals came from the social work department.

Authority C

General characteristics

Authority C is a rural, widely spread authority and its population is much smaller than that of Authorities A and B (105.000). Distances caused problems for access to services and for the partner agencies in delivering services. In this authority there is high unemployment and considerable poverty. There are both social work and education under 5 services.

Under 5 social work services

The under 5 social work services include five family centres. One significant difference with the family centres in authorities A and B is the lack of full-time placements. More specifically, children spend only a few hours a week in these centres and the bulk of services focus on parents rather than on children. Interviews with the project leaders in the family centres revealed that they seldom collaborated with educational psychologists or any other education department staff.

Under 5 Education Services

In 1997/8, the provision for children in school nursery classes increased from 50% to 85% as a result of the voucher scheme. There are 30 nursery classes offering sessions of 2 hours each. The education services included only mainstream nursery schools and classes as there was no special educational provision in the authority for children under 5.

However, in the period that the fieldwork was conducted there was one such establishment in progress.

Comparison of the early years services provided in the three case-study authorities

In this sub-section the early years services of the three case-study authorities are compared at different levels.

Similarities and differences in the structure of the under 5 services

Although, until recently, all the case-study authorities had both social work and education services for pre-five children, as explained earlier, authority B transferred all its under 5 services to the education department. Thus, all the management and funding for the under 5 services in authority B had moved to the education department. Interviews with managers in the education and social work department in authorities A and C did not reveal any intention of integrating their under 5 services in the near future.

Similarities and differences in the under 5 social work services

There was a wide variation in the social work services provided in the three case-study authorities. One similarity between the under 5 social work services offered in the three case-study authorities was that all authorities had family centres. However, although in authorities A and C the family centres were the responsibility of the social work departments in authority B one of the family centres was not funded by the social work department.

Another difference between the available services in authorities A and C and those offered, until recently, in authority B was that the latter authority used to have a wide variety of under 5 services. More specifically, although authorities A and C had only family centres

(authority C offered only a few hours placement), authority B had one children centre, six day nurseries and two family centres.

Similarities and differences in the under 5 education services in the three case-study authorities

Authorities A and B had both mainstream nursery schools/classes and special educational provision nurseries whereas authority C had only mainstream nursery schools. However, as reported earlier, this would change as authority C was planning special educational provision that period.

Summary

In the first section of this chapter it was argued that although a number of positive changes have taken place in the early years provision (a range of services for children under 5 has been developed, most of the children in their pre-school year get a placement and children with special educational needs are given priority) there is still a long way to go, especially regarding the co-ordination of these services. Several differences in the service provision offered in the three case-study authorities were identified. First, while authority B had recently transferred all its under 5 services to the education department, authorities A and C did not have such plans. Second, while the social work services in authorities A and C consisted only of family centres, there was a wide range of early year services in authority B. Third, while there were several options of school placements for children with special educational needs in authorities A and B no such alternatives existed in authority C.

In the following chapter it is shown how these differences in the service provision affect the collaborative arrangements between education and social work authorities.

CHAPTER 6

CHAPTER 6

PATTERNS OF COLLABORATION: RESPONDENTS' EXPERIENCE AND PERCEPTIONS AND EVALUATION OF THE COLLABORATIVE ARRANGEMENTS

Introduction

In this chapter patterns of collaboration are examined at three different levels using various sources. In the first section an attempt is made to describe and compare the collaborative arrangements in the three case-study authorities using documentary sources and interview data. This theme was explored through the following question: *'Can you describe to me the different types of formal and/or informal collaborative arrangements that you use when you collaborate with (the other department) in assessing the special educational needs of children under 5 ?'* In order to ensure that all respondents perceived the first question in the same way and avoid any misunderstandings, this question was always accompanied with the following definition of formal and informal collaborative arrangements. *'By formal collaborative arrangements I mean structured/permanent multi-disciplinary teams which have a core membership and by informal I refer to both non-structured/client multi-disciplinary teams which do not have a core membership as well as to casual meetings, telephone conversations and correspondence'*. The respondent's views about the patterns of collaboration are also explored.

In the second section an attempt is made to evaluate the collaborative arrangements in the three case-study authorities. This section is based on three sources: criteria of effectiveness for multi-disciplinary teams; the perceived advantages of formal

arrangements which were derived from respondents in authorities A and B; and my observations of formal meetings in authorities A and B.

SECTION A: DESCRIPTION OF THE COLLABORATIVE ARRANGEMENTS AND RESPONDENT'S EXPERIENCES AND PERCEPTIONS

Description of the formal and informal arrangements

Three authorities with different collaborative arrangements were selected from the postal survey with the aim to explore why and how different patterns of collaboration had been developed as well as to examine their advantages and disadvantages (see chapter 3). In summary, although authorities A and B had both formal and informal arrangements the primary function of their formal multi-disciplinary team differed. On the other hand, authority C had only informal arrangements but it was planning to formalise its collaborative structures.

Range of professionals involved in the inter-agency collaboration

In authority A it was not common practice for social workers to collaborate with educational psychologists in assessing the children's special educational needs. In fact, social workers in children and families teams collaborated with educational psychologists only in special circumstances, such as for child protection cases, children on supervision order and families who were receiving respite care. However, there was frequent collaboration between day-care staff (under 5 social work staff) and educational psychologists. In addition, the day-care staff occasionally collaborated with nursery

teachers in nursery schools and classes when the children moved from social work day-care services to nursery schools or classes or when the children had a shared placement.

In contrast with authority A, in authority B there was a history of close collaboration between education and social work staff and it was common for both social work practitioners and day-care staff to collaborate with educational psychologists. Day-care staff also collaborated often with nursery teachers in nursery schools and classes for the same reasons as in authority A.

In authority C there was not collaboration between day-care staff and educational psychologists because, as explained in the previous chapter, the social work departments offered placements of only a few hours for pre-five children. As far the collaboration between social workers and educational psychologists is concerned, although educational psychologists very rarely collaborated with social workers in the children and families teams they did collaborate often with social work practitioners in the 'children affected by disabilities team' (CHAD team). This means that educational psychologists worked together with social workers only for children who had special educational needs because of their disabilities and not for children with any other type of special educational needs.

Comparison of the formal multi-disciplinary teams for children with special educational needs in authorities A and B

In this sub-section the formal MDTs in authorities A and B are compared at different levels. At this point it is important to offer a definition of the multi-disciplinary team. According to Ovretveit (1993) a formal MDT is

'a group of practitioners with different professional training (multi-disciplinary), employed by more than one agency (multi-agency), who meet regularly to coordinate their work providing services to one or more clients in a defined area' (ibid:9).

Moreover, the formal MDTs have agreed and explicit policies, a person who Chairs the team meetings, the team has a shared base, which clients can come to, and the referrals are made to the team.

Similarities and differences in the remit of the formal arrangements in authorities A and B

Although several similarities in the remit of the formal MDTs, organised by the education departments, for pre-five children with special educational needs in authorities A and B were identified, their primary function was different. This difference concerned the assessment process itself and, more specifically, the lack of a formal structure in authority A where the nature of the special educational needs of pre-school children was assessed using a multi-disciplinary approach.

The main function of the MDT in authority A was 'joint working between professionals and parents' including the opportunity for parents to discuss their concerns and/or complaints about the service provision that they were receiving. The team members discussed children at various stages in the assessment process i.e. prior, during, or after the assessment process. However, in authority B the primary function of the MDT was multi-disciplinary **assessment** of the children's needs and, secondary, discussion with parents about the service provision. This does not mean that the team members in authority B did not value close working with parents but that they believed, in contrast

with team members in authority A, that these two functions could be combined as the following description of the MDT procedures in authority B demonstrates.

Prior to the MDT meeting the children who were going to be discussed in the next meeting, were formally assessed by a range of professionals during a three week period and the professionals discussed the findings of their assessment before, during, and after the meeting with the parents. During the meetings parents were also encouraged to raise any issues that they had with the service provision.

When the MDT members in authority A were asked why they did not have a multi-disciplinary **assessment** team they explained that it was easier for everybody to carry out their assessments independently. They also explained that even if they had wished to have an MDT, where exchange of ideas about the nature of the special educational needs of the pre-school children could have taken place this would have been unrealistic and/or unfeasible as both departments were under-staffed and, thus, worked under great pressure. The following quotation from a team member illustrates these concerns :

‘There is a time issue, there is a deadline about assessments, sometimes professionals do not even find time to do their own independent assessment let alone arrange a MDT meeting It is not mandatory to hold such MDT meetings because everyone knows how important it is not to miss the deadline and how difficult it is to co-ordinate a multi-disciplinary assessment meeting. I know that it is our responsibility to seek out information and/or advice from other colleagues but we try to do so by requesting assessment reports ... However, sometimes a ‘Case Conference’ can be called to see who is involved with the child and to see what services professionals think that should be

offered to this child but this happens very seldom and is not common practice’.

Another important similarity in the functions of the MDTs in authorities A and B was to check out if there were gaps or overlapping in the service provision, a procedure which included review and co-ordination of the available provision. Lastly, and perhaps most importantly, the nature of these MDTs was similar, since both were advisory and not decision-making bodies.

Similarities and differences in the membership of the formal arrangements in authorities A and B

The MDT in authority A had a core membership which consisted only of managerial staff (Principal educational psychologist, Practice team manager from the social work department, Child health pediatrician and manager from voluntary organisation). The practitioners, who were involved with the children discussed in these meetings, did not participate in these meetings but, instead, they sent their assessment report to the MDT.

The MDT in authority B differed from that in authority A in two aspects. Firstly, although that MDT also had a core membership, not all the core members were managerial staff (Principal educational psychologist, Child health pediatrician, Physiotherapist, Health visitor, Speech and language therapist and Social worker). Secondly, as opposed to authority A, in authority B the practitioners, who were involved with the children discussed at the meetings, were invited to participate in and contribute to the meetings. The rationale underlying this difference in the operation of collaborative arrangements in authorities A and B is given both in sub-section ‘reasons for the

establishment of formal arrangements in authorities A and B' (respondent's view of the situation) and section 'assessment of the formal MDTs' (the researcher's view of the situation).

Similarities and differences in the criteria of the formal arrangements in authorities A and B

Although the formal MDT in authority A discussed only children with complex physical or mental disabilities and/or complex family situation, that in authority B discussed children with any type of special educational needs.

The MDT in the first authority covered all the areas in the Council whereas the MDT in authority B, until recently, covered only two areas in the authority because the team was at a piloting stage (this changed in the beginning of 1999 and the MDT is now permanent and covers all the areas in the council).

In addition as mentioned earlier, authority B focused only on children who had not had a formal multi-disciplinary assessment and there was some concern about some or all of their developmental areas whereas the MDT in authority A discussed children prior, during or after being assessed.

Description of the informal teams Authority C had an informal team specifically for pre-five children with special educational needs, which was organised by the education department. In addition, two common informal teams, organised by the social work departments were identified, in the three case-study authorities. These teams were called 'informal client teams' and the meetings 'case conferences' because these teams were not

structured/permanent, they did not have a core membership and they were held for a particular child every time.

Ovretveit (1993) states that an informal client team is the group of people helping one client at a particular time. The team members may not even know each other, and they may change in membership over time because different professionals may be involved for different cases discussed in the meetings. This often changing group of professionals is called a team because each member contributes to the common purpose of helping the client, in our case assessing different aspects of the children's needs, and they related to each other by doing so.

Other differences between the informal client MDTs and the formal MDTs examined above is that the informal client teams are more specific and instrumental than the latter teams. Moreover, in formal MDTs the team members relate more to others in the team, and they also have a relationship with a stable entity called 'the team', to which they have obligations and from which they gain rights. However, the informal MDTs have no loyalty to the team since they are 'contributors' and not 'members'.

Informal client team in authority C organised by the education department

All the professionals involved with the children discussed participated in these meetings as well as the parents of these children. The professionals usually discussed children with severe disabilities, but the complexity of the family situation was also taken into consideration.

The following quotation from managerial staff in the education department in authority C summarises the major functions of these meetings:

'Usually to review the child's development and progress, to see whether [the child] is making progress and we are meeting the child's needs. If he has not come to the school system, it is also to look what the needs will be, to make sure that we will provide for him when he comes to school. To discuss openly with parents the different alternatives [in educational provision], the advantages of one nursery against another one ... So, in essence, it is reviewing where the child is, what the problems are and planning for whatever the next step is ... [Parents] certainly discuss any concerns about their child. We would not normally constitute a meeting ... to invite parental complaints. That would certainly set the wrong tone for the meeting ... If they have a complaint I would expect that to be dealt with separately through the right procedures. It is not the function of the 'Case Conference' to deal with complaints'.

The above quotation indicates that there were some similarities in the function of the informal client teams in authority C with those in authorities A and B (review and co-ordination of services and discussion with parents). However, its functions were more similar with those in authority A since the team's aim was not multi-disciplinary assessment of the children's needs.

In the remainder of this sub-section we will briefly examine the two common informal client teams, in the three case-study authorities, which were organised by the social work departments.

Common informal client teams in the three case-study authorities organised by the social work department

Review meetings in the day-care services took place every six months for all children that attended these placements but there were also additional meetings for children with special educational needs. In these meetings all the professionals who were involved with the children reviewed were invited.

The main function of these client teams was to review the services provided for each child. More specifically, the contributors assessed whether the placement was still the right resource for the child, whether other resources needed to be found or changes in the programme needed to be made. Parents were always present in these meetings and participated in the decision-making.

According to the Children (Scotland) Act 1995 when a child is looked after because he or she is subject to a supervision requirement or a supervision order, the Local Authority should draw up a written Care Plan for the child which outlines the arrangements which have been made for the child and hold '*Child Care Plan meetings*' (case conference meetings) every six months (The Scottish Office, (1997d), Vol. 2, Regulation 6, Para. 10-12).

'The plan should, wherever practicable, be drawn up in consultation with the child, the child's parents, the prospective carers (if not the parents) and other important individuals and agencies in the child's life. Whenever practicable, the plan should be drawn up before a placement is made, otherwise it should be drawn up as soon as reasonably practicable after the child is placed. It should be reviewed, and where necessary adjusted, at

the first and subsequent reviews or if the child changes placement'

(The Scottish Office, (1997d), Vol. 2, Regulation 6, Para. 13).

The Act also advocates that the child care plan should be a practical document which spells out who will be doing what, and by when, in order to meet the objectives of the placement (The Scottish Office, (1997d), Vol 2, Regulations 4 &5, Para. 16). In these meetings, a comprehensive assessment was undertaken by the social work practitioner, who had to contact all the professionals involved with the child and either invite them to these meetings or ask for their assessment reports.

Respondents' views about the patterns of collaboration

Reasons for the establishment of formal arrangements in authorities A and B

Reasons for the establishment of the MDT in authority A

When the MDT was first introduced in authority A in 1989 it was called 'multi-disciplinary **assessment** team', but, as one manager from the social work department explained:

'In our authority we dropped the 'A' from the term multi-disciplinary assessment team in a very early stage, because we do not view the MDT as a assessment meeting'

The most common cited reason for the establishment of the formal MDT was a need for parents to express their concerns, complaints or any other issues about the services that they were getting. The formal MDT grew up from people who already were involved with children with special needs. The practice team manager from the social work department commented on the underlying thinking and actions that took place during the establishment of the formal MDT for children with special educational needs:

'At that time, the local authority decided to include senior staff from various departments (health, social work, education) as well as representatives from voluntary organisations. We thought that it was more appropriate not to invite the practitioners, who were working for the children discussed, to these meetings in order to let parents feel free to complain about the services that they were receiving'.

Reasons for the establishment of the formal MDT in authority B

The idea of a multi-disciplinary assessment process was first mooted in August 1993. Discussions with senior managers from various agencies went on during 1993 and the early part of 1994. It was then recognised that such a meeting would improve the current service and would simplify the work of professionals. Equally, it was also accepted that in order to be effective, it was important that there was some central co-ordination. In April 1995, a pilot project was set up which covered only two postal areas. The Chair of this meeting (senior educational psychologist) reflected on the early discussions about the establishment of the meeting as follows:

'In the past, the system was too slow, because it took a long time for one professional to get in touch with the others and sometimes it took several months for all professionals to be involved as we did not have a co-ordinated approach'

Advantages and disadvantages of different collaborative arrangements in the three case-study authorities It is important here to clarify that although identical questions as to the advantages and disadvantages of various types of collaborative arrangements were asked in authorities A and B, in authority C, different questions were used because they had

only informal arrangements. For instance, in authority C, instead of asking '*What are the advantages of formal arrangements*' the following question was used: '*Do you think that formal collaborative arrangements would be useful ?, If yes, in what way it would be useful ?*' (see Appendix 2.5.).

Advantages of formal arrangements

Although some of the responses of the education and social work department staff in the three case-study authorities were similar, participants in authority B reported some additional advantages of formal MDTs.

Common advantages mentioned by respondents in the three case-study authorities

Almost all the informants stated that formal arrangements *provide a framework for collaboration and encourage informal contact*. As one social worker in authority A explained formal arrangements 'are a strategy, top management participates on both sides and validates contact all the way down'. Three quarters of the respondents reported that formal arrangements need to be in place to *monitor that collaborative activities are taking place* and to *ensure that work is being done*. In the words of an educational psychologist in authority B 'when you know that you have to complete some work before a formal meeting you make time to complete it'. Half of the informants also stressed that such arrangements *make people accountable* since these meetings are minuted and there is allocation of tasks. A few respondents added that formal arrangements *promote fairness*, in terms of offering same services to similar cases, and that they *offer an opportunity to the practitioners to inform the managerial staff about their caseload*.

Additional advantages mentioned by respondents in authority B

The majority of the education and social work participants in authority B reported that formal arrangements facilitate the task of the practitioners in several ways. Three quarters of the respondents mentioned that the formal MDTs *help communication* because professionals get to know the people that they work with and that they also *help both professionals and parents to identify who are the key people and to take things forward*. Half of the respondents reported that they also *save time* because as one educational psychologist in authority B explained 'if you try to see each person separately every time you waste a lot of time'. Several interviewees mentioned that formal arrangements are *useful for parents* because it is good for them to get to know the professionals who work with their child; to see all the professionals involved with their child at the same time, and to have a clear idea about the differences in the roles and tasks of these professionals.

Disadvantages of formal arrangements

The majority of respondents in the three case-study authorities identified two main disadvantages of formal arrangements. These disadvantages were that they are time-consuming and that they can be 'daunting', or intimidating for the parents. Other disadvantages reported by several informants were:

'It can sometimes be a meeting for the sake of having a meeting ... If the structure is there and people feel that they ought to use it, but they have not actually got anything terribly important to say, they may just fill in the space to do it because they are meeting anyway and they do not always plan carefully in advance for formal meetings ... to make sure that they make the best use

of the time ...'

' There may be other problems around that people will then say "Oh, we can discuss them in the MDT", which is not what the structure of the MDT is about or the purpose or the outcome should be. But because everybody happens to be there anyway why can't we deal with that ? I think that professionals tend to go along with that too. So, that can be a disadvantage'
'Again, I suppose is a time element, of formal structure'
'You are not dealing with the immediate problems because we are not having them regularly enough. We tend to have general discussions ... and sometimes it is helpful to deal with the problem straight away' **Educational psychologist (Authority A).**

'If there are big differences in opinion, it can end up being an open debate rather than a formal meeting and some people can be very critical of other agencies'

'It can also be confusing for parents to listen so many professionals and especially when there is open disagreement or differences in opinion' **Educational psychologist (Authority B).**

One social worker in authority A, noted that she could not think of any disadvantage of having formal arrangements as long as they continued to have informal arrangements. In her own words, 'it could be a disadvantage if we could speak only in formal meetings about a case but not in the meantime'.

When the respondents were asked whether the advantages of formal arrangements outweighed the disadvantages all the respondents stated that there were far more advantages than disadvantages in having formal MDTs.

Advantages of informal arrangements

The study found that not only the formal but also the informal arrangements have many advantages. The most commonly reported advantages were :

'It allows a fine tuning of formal action plans being agreed broadly but not in fine detail and so issues can be worked out between practitioners down the line ... Formal arrangements tend to be on a monthly basis so it allows a fine tuning of plans and reviewing of what is actually happening'

Social worker (Authority A).

'In the casual meetings there is more openness both in terms of professionals and parents because there are no minutes'

Educational psychologist (Authority A)

'Parents prefer casual meetings because there is a relaxed climate, not many people, and informal conversations'

Educational psychologist (Authority B)

'You can be very creative and flexible, you can arrange to meet other professionals or parents when they need to see you and not where it fits everybody'

Educational psychologist (Authority C)

Disadvantages of informal arrangements

Although many respondents from the three case-study authorities had some difficulty in identifying disadvantages of the formal arrangements, they seemed to be very clear about the disadvantages of the informal arrangements and to report several of them. The most important cited disadvantages were :

'They can become overinformal, collusive. Too much informality can lead to the passing of not very relevant information, something like gossiping, we need to be very careful to pass only the necessary information and respect issues of confidentiality, we need to maintain professionalism'

Educational psychologist (Authority A)

'Sometimes informal arrangements can lead to blurred roles because nobody checks what the other person does'

Social worker (Authority A)

'The fact that the casual meetings are not minuted can leave you 'high and dry' or 'up to the river without a paddle'

Educational psychologist (Authority B)

'Lacks accountability, you are working more on people's good will, sometimes people are reluctant to collaborate and you have to insist on their help, so it needs continuous negotiation'

Educational psychologist (Authority B)

Satisfaction with the patterns of collaboration in the three case-study authorities

Satisfaction with the patterns of collaboration in authorities A and B

Most of the education and social work respondents in authorities A and B seemed to be content with the existing patterns of collaboration. The following quotations illustrate these responses :

'I think there is always room for improvement ... I do not think that you can ever say that you are totally satisfied ... but, in general, I am satisfied. It is very important to have both informal and formal arrangements because they have different functions. We need formal arrangements in order to have a clear format and

informal [ones] in order to keep informed about the progress of the child or what actions have been taken by other individual workers' **Social worker (Authority A).**

'There is room for both because you need both in order to meet the needs of each child. The one could not exist without the other' **Manager from day-care services (Authority A).**

'Yes, but I think that it very important to have a balance of both informal and formal arrangements because each arrangement has its own advantages and disadvantages and one should complement the other' **Educational psychologist (Authority A).**

'It works well in this way, I like working in a multi-disciplinary way and use both formal and informal arrangements' **Educational psychologist (Authority B).**

Satisfaction with the patterns of collaboration in authority C

In contrast with the other two case-study authorities analysed above, in authority C there were differences in the responses given by education and social work department staff. There were also differences in the frequency of satisfaction mentioned with the existing patterns of collaboration.

Although in authorities A and B the majority of respondents from education and social work departments appeared to be satisfied with the existing patterns of collaboration, in authority C few respondents from the education department seemed to be satisfied with their collaborative arrangements and no respondent from the social work department was. Overall, education department staff seemed to be more accepting of the existing situation and more optimistic about the planning for the establishment of formal arrangements in their authority in the near future as the following quotation illustrates :

'I think our informal arrangements work very well and I am sure that the formal arrangements that we are developing during this period will fill any gap ...' **Educational psychologist (Authority C)**

Three quarters of the social work respondents were keen to explain the reasons for their dissatisfaction with the current collaborative arrangements. The most important reasons mentioned are presented below :

'I think that it would be advantageous for everyone to formalise our procedures. Often I feel that, for some children, something more could have been done if we had a formal MDT'
Manager from the social work department (Authority C)
'We are starting on the road to have clear collaboration. It is not something that we have previously experienced In a small area it is too personalised. We think individually, we do not think strategically ... So rather than "Oh, I will call [name]", it actually becomes a pattern, it is a procedure Develop and grow, that's very much the stage that we are at [Formal arrangements] make it much clearer for all practitioners at all levels and also guard against the risk "Oh, I will speak to [name]" It can not be about the individual, it has to do about the structure because if she [the practitioner] wants to move on or changes post or whatever, will the next person that will come in to the post be willing or be as committed to work in the same way ?. If it is a formalised structure then it is part of an accepted process of the authority and I think the authority ... so there are a lot of benefits for the individuals when it is backed up by structure ...'
CHAD team member (Authority C).

Practical difficulties and concerns in formalising the procedures in authority C Several respondents from both departments had some concerns about the formalisation of the collaborative procedures. The following quotations illustrate these concerns :

'... One of the things that we looked at within [Authority C], because of the geography of [Authority C] is how else might we deliver services in a multi-disciplinary way and what you are faced with is ... there are short-staffing numbers. I think that professionals will feel uncomfortable to have to spend more time in more meetings because literally you [have] got two of us covering the complete geography of [Authority C] You have to balance that against actually doing the work'

'What we have agreed is that in year one of the Children's Services Plan, we have to sit down with the agencies again and actually work out what we think that would be good assessment of need for children within [Authority C]. The Act, kind of says, that social work should take the lead role in that. There are a lot of different formats that we have looked at, some of them were very heavy or very cumbersome, some people have used community care ones used in other authorities and basically adapted them

'Social worker (Authority C)

'.... So, yes formalising them [the collaborative arrangements] but not making them bureaucratic ... or to have to jump through hoops'

Manager from the social work department (Authority C)

'We are still in a development stage, there is certainly need for wider social work involvement but I think that it will be very difficult for social work department staff to manage to participate because they are short-staffed'

Manager from the education department (Authority C). '...

SECTION B : EVALUATION OF THE COLLABORATIVE ARRANGEMENTS

Informal, formal or a combination of both types of teams ?

There is a dearth of research studies on the effectiveness of formal MDTs but, unfortunately, very few studies on the effectiveness of informal client MDTs. Ovretveit (1993) claims that the lack of such a body of literature is based on the assumption that formal teams are always the best way to serve client needs. However, Ovretveit argues 'where profession-managed services and agencies collaborate closely at each level, and an established network exists and works, a formal team may not be necessary to get effective matching and co-ordination' (1993:72).

As was shown in the previous sub-section there was a consensus among respondents in the three case-study authorities that having only informal arrangements is not very effective and that the best strategy is to have a combination of both types (formal MDTs, telephone contact and correspondence). More specifically in authority C it was found that although there were close links between the educational psychologists and the CHAD team members both sides felt that the informal arrangements were not very effective and that there was need to change the structure of the informal MDT.

The managers of both departments had, therefore, set out in the establishment of a formal MDT for children with special needs where the team members would meet regularly and would have a core membership. However, as shown in the previous sub-section, the planning of such arrangements was not smooth and there were a number of pragmatic considerations such as the fact that both departments were short staffed and that the authority was small and widely spread which meant that, first, there may not be enough cases to justify regular frequent team meetings and, second, that it would be difficult to

arrange for transport for the parents of these children. Thus, in the case of authority C, a solution may lie in the establishment of a formal MDT, which although it would fulfil the basic characteristics of such a team (having regular team meetings and a core membership) it would also allow for flexibility. For instance, the venue of the team meetings could change in order to be accessible to parents of children with special educational needs (the education and social work department in authority C had their quarters at different areas of the authority) In addition, the team members could arrange to meet regularly but not frequently and, thus, instead of having team meetings once a month, as is the case in authorities A and B, they could arrange to meet every two months and depending on the referrals and their other responsibilities they may discuss one or more cases every time. Of course, one issue that remains open is whether the managerial staff in the education, health and social work departments in authority C would decide to have a formal MDT similar to that in authority B (multi-disciplinary assessment team) or would prefer to have an MDT similar to that in authority A where the main function of that team would be the co-ordination of services and a forum for parents to express their opinion about the service provision.

Assessment of the formal MDTs

Sources used for the construction of assessment criteria of the formal MDTs in authorities A and B

In this sub-section two different sources are combined in order to assess the effectiveness of the formal arrangements in authorities A and B : literature on effectiveness criteria; and the perceived advantages of formal arrangements which were derived from policy

documents and respondents in authorities A and B. The latter source is also used as an assessment tool for checking whether what the local policy documents and the respondents in authorities A and B reported had happened in the formal MDT meetings did actually happen. The researcher's perceptions are based on her observation notes from the attendance in the formal MDTs in authorities A and B. As stated in chapter 3, four MDTs were observed, in the two case-study authorities which had formal arrangements, where 8 cases were discussed in each authority and each meeting lasted approximately 1 hour.

Literature on effectiveness criteria for formal MDTs

Four main characteristics or properties of effectively functioning formal MDTs have been identified. These characteristics are : 1) a clear elevating goal, 2) the meetings are well prepared, 3) collaborative climate, 4) the team meetings finish with an action plan and the team members evaluate their functions and process over time (Anantaraman, 1984b; Larson & Lafasto, 1989; Kazemak, 1991; Lacey, 1995).

Additional characteristics of effective meetings given from the participants of the study

Four additional characteristics of effective functioning formal MDTs can be derived from the summary of the advantages of formal arrangements given from the respondents in the three case-study authorities. These additional characteristics are that they : 1) encourage information-sharing both amongst professionals and between professionals and parents 2) encourage advice-giving and problem-solving approach, 3) promote close working with parents and 4) promote fairness.

In the next sub-section the formal arrangements in authorities A and B will be assessed with regard to each of the above characteristics of effective formal MDTs.

Assessment criteria in practice

A clear and elevating goal

Larson & Lafasto (1989) state that successful formal MDTs have both a clear understanding of the goal to be attained and a belief that the goal embodies a worthwhile or important result. Clarity means that there are specific performance objectives, phrased in such a simple way that it is possible for everyone to understand them. An elevating goal means that the goal has the potential to be challenging both to the team members individually and/or to the collective efforts. A goal can be elevating when it stretches the limits of physical and mental abilities of the team members and when it provides an opportunity to excel.

Formal MDT members in authorities A and B appeared to be well aware of the purpose of the meetings and the majority of them were involved in these teams from their early stages. However, as the respondents themselves admitted in the interview, both the Chair and the team members occasionally 'abused' the purpose of the meetings. The following quotation from an educational psychologist in authority A highlights this situation :

'... Sometimes professionals use the meeting for discussing other cases because they have the chance to see other professionals who are involved in the same case and the rest of the members sometimes seem to go along with this'.

The team members in both authorities, and especially in authority A, did not seem to find the goal elevating, as they tended to behave in a mechanical way throughout the formal meetings. The following two examples demonstrate some of these mechanical actions and their implications for the parents of children discussed at these meetings.

In one MDT meeting a parent asked the team members if it was the MDT's function to decide about the future educational provision for her child. The educational psychologist explained that one of the roles of the MDT was to inform parents about the alternative educational provision and he named some of the available alternatives. Then, the Chair changed the subject and asked the mother about some services that she was receiving.

At that point, the researcher was surprised that the Chair did not check with the mother whether she understood what he had told her or if she had any questions. The only thing that he said was that she had plenty of time to consider these alternatives and that the most important thing at that moment was to get an idea whom to contact in case she needed to ask about some service.

Later on in the meeting the Chair said to the mother :

‘If at any time in future you need to initiate a comprehensive formal assessment you can call this telephone number. You may not feel that it is necessary to have it now but in future it can be very useful because a comprehensive assessment takes account of all the assessments that have been done for the child, it pulls all the information together and in this way is holistic. What I mean by that is that the whole context will be taken into account, not only Cameron's needs but also his brother, yourself, the whole situation because the recent Children Act gives parents the right to initiate a formal assessment if they wish to’.

The researcher was again surprised by his approach because he did not ask the mother if she had any questions about the assessment process, if she had understood everything, if she wanted to say something about his comment, and, especially, because he did not suggest to the mother that she could initiate a formal assessment. He seemed to inform the parent about her rights because he had to do so and that it was actually a boring procedure for him.

However, it was not only the Chair who gave to the researcher this impression but all the team members seemed to behave in a mechanical way when explaining to the mother how the services worked. Of course, one has to take into account that professionals participate in so many similar meetings and it is rather boring for them to say the same things all the time.

When the researcher left the meeting she was rather disappointed about how that meeting had turned out, and her first thought was that professionals should bear in mind that they do not explain the same things to the same people but to different people every time, and that it is their duty to inform parents and to answer their questions.

Another incident that took place in a MDT meeting is also worth mentioning because it shows how inflexible the formal arrangements can be and how apathetic the professionals can be in these meetings.

During the discussion that professionals usually have before a MDT meeting, the pediatrician said that she hoped that the mother would turn up at that meeting because she had called her the previous week and asked if she could bring along Tina's nursery nurse and the pediatrician explained to her that it would be better not to, because MDTs

consisted of managerial staff and not practitioners but the mother did not seem to be happy about it.

The researcher expected that one or more team members would comment on this statement, for example, by saying that 'if the mother thought that it would be useful to invite the nursery nurse we could make an exception' or ask for further details such as 'why did she think that she wanted to invite the nursery nurse' but none of the members made any comment about what the child health pediatrician had said.

It is pertinent here to mention that in the observations of the MDT meetings in authority B the researcher did not notice any difficulty in mixing up managerial staff with practitioners. Although the MDT members in authority A claimed that having practitioners in such meetings would discourage parents from expressing freely their opinion about the services that they were getting, in three out of the four MDT meetings that the researcher attended in authority B parents did not seem to have such problems.

The pediatrician's instinct that the mother would not turn up in the meeting turned out to be true. The researcher was surprised that none of the members suggested calling her to check if she intended to come later on, or to see if everything was all right with her and her family or, in other words, to try to find out the reason for not coming to the meeting. The only thing mentioned in the meeting was that the mother probably did not feel well enough to come to the meeting because of her depression, and that they should send a letter to her which would ask her to reply if she was interested in arranging another meeting in the near future.

Formal MDTs encourage information-sharing both amongst professionals and between professionals and parents

At the beginning of the MDT meetings in authorities A and B each professional introduced himself/herself. Although the parents in authority A did not meet the practitioners who were involved with their own child, (the practitioners were not invited to these meetings) their reports were read by the Chair of the meeting. As the formal MDT in authority B invited practitioners, the parents had an opportunity to meet and discuss with both the people who were involved with their child and the senior staff from these agencies. Each practitioner in the MDT in authority B gave a summary of his/her assessment report or otherwise explained his/her involvement with the child and offered a verbal assessment of the child's needs, behaviour, abilities and progress.

Formal MDTs are well prepared

Although the formal MDT in authority B seemed to have well prepared meetings the MDT in authority A did not. In order to illustrate this difference both quotations from respondents in these authorities and examples of incidents that occurred in the meetings will be used.

Although the team members in both authorities were given a copy of the various assessment reports prior to the meeting, they often received them only one or two days before the meetings and, therefore, the professionals had little time to read them beforehand. However, the difference between MDTs in authorities A and B is that, as the respondents themselves admitted, in authority A the MDT members did not read the assessment reports whereas in authority B, no matter how stressful the situation was, the

professionals always read the assessment reports. The following two quotations explain this situation :

'One problem that we often face is clerical support. Because we are short of clerical staff, the requests to professionals involved with the children who are going to be discussed, may delay to be sent to these practitioners and, thus, they send their assessment reports very late and we do not have chance to read all of them and we often have to depend on the picture that the parents present to us'
Senior educational psychologist (Authority A).

'The assessment reports are prepared within the three weeks period after the initial meeting so everybody works separately to do their own assessment report quickly and we usually submit our assessment report only one day before the meeting. So we all have little time to read them before the meeting, and this can be very stressful'
Educational psychologist (Authority B).

It is pertinent here to examine the consequences of members not having time to read the assessment reports produced by other professionals or, even worse, not having time to read their own assessment report prior to the meeting.

In three out of the four MDT meetings in authority A, the team members did not appear to be well prepared to answer the following question 'Can you summarise the key issues about the children that are going to be discussed in the meeting?', which was always asked by the Chair of the meeting in the discussion that preceded the formal meeting with the parents. The team members usually started reading quickly through the referral report and any assessment report that they had produced and nobody seemed to be certain about the key issues. In one case discussed, the team members were not even sure about the particular needs of the child or why the child had been referred to the MDT. In another

team meeting there was some confusion between the members about which cases were going to be discussed at the meeting. When the team members gathered together the Chair announced the two cases that were going to be discussed but the clerical staff intervened, explaining that the Chair had made a mistake about one of the cases. The Chair apologised for his mistake but then the health visitor said that she thought that they were going to discuss a third child. Lastly, the team members frequently jumped from one issue to another which was another indication that they were not well prepared for the meeting.

Formal MDTs encourage advice-giving and problem-solving

Both MDTs adopted advice-giving and occasionally problem-solving approach. Two examples of advice-giving are given in this section, one is from the MDT in authority A and the other from the MDT in authority B.

When the Chair of the MDT in authority A asked a parent whether there was anything that she would like to ask or to discuss, the mother explained that she was not feeling well psychologically because very recently she found out that her child's learning difficulties would be permanent. The social worker and the voluntary organisation representative informed the mother about some groups that she could join. The social worker also asked the mother if she was aware of the address of the local social work centre and because the mother replied negatively, he gave it to her by saying : "That's the local social work centre, just in case you need it for some reason, although there are many parents who feel that they can manage without social work help or advice".

In the MDT example in authority B, the parents asked the educational psychologist's opinion about the behaviour of their child and the educational psychologist told the parents that, although the pediatrician seemed to be rather concerned about the child's behaviour, he felt that there was nothing to worry about because in his own words 'Nick is not uncontrollable but definitely needs some guidance because he is manipulative'. The other team members confirmed what the educational psychologist had said. Then the educational psychologist gave the parents some advice about how to react when Nick became manipulative.

Formal MDTs promote fairness

If the criteria of the MDTs in authorities A and B are taken into account, one could also argue that both MDTs failed to promote fairness. As the MDT in authority A discussed only children with specific types of special educational needs (children with complex difficulties and/or complex family situation) it did not offer an opportunity to parents of children with other types of special educational needs to make a referral to the team. Similarly, as the MDT in authority B covered, until recently, only two areas in the Council, it did not offer an opportunity to parents of children with special educational needs who were not living in those particular areas in the authority to make a referral to the team.

In addition, the observations in the eight cases discussed in each authority offered another indication that these meetings did not always promote fairness. This point applies to formal MDTs in both authorities and is related to the parents' attitudes and their consequences. From the observation of both formal MDT meetings, it was discovered

that when parents persisted or 'pushed', in various ways, to get some services or other resources, they eventually achieved their goals as professionals changed their decisions or actions. This means that assertive, articulate and persistent parents could get more resources than parents who did not have these characteristics which, in turn, implies that professionals did not have or did not use the same criteria of providing or not providing some resources and thus, these teams did not always promote fairness.

For example, in a MDT meeting in authority B the educational psychologist told the parents that he felt that he had finished his work with their own child but when the mother started crying he took back his decision and promised to keep an eye on the child. In another example a parent asked for an extension of the hours that her child was getting in his placement and when she was told that this was not easy, because of the long waiting list, she insisted that the severity of her child's condition required special arrangements. Then, the Chair of the MDT in authority A promised to talk with the staff in the child's placement in order to change the existing arrangements.

Collaborative climate

Trust is believed to be an important element for promoting a collaborative climate. Trust can only take place in an environment that includes four elements : a) honesty (no lies, no exaggerations), b) openness (a willingness to share information, perceptions, ideas), c) consistency (predictable behaviour and responses) and d) respect (behave to other members with dignity).

Both MDTs seemed to operate in a relaxed collaborative climate and fulfil all the four above mentioned elements of trusting relationships. In addition, in both formal MDTs the leadership was not stable but changed every year between team members.

Close working with parents of children with special educational needs

Although one of the main functions of both formal structures was parental involvement, in authority A this role was restricted in the involvement of parents in the review of the service provision. However, in authority B it also included parental involvement in the assessment of the special educational needs of their own children. As stated earlier, one of the functions of the MDT in the latter authority was the multi-disciplinary assessment of the special educational needs of young children. This procedure included the following three stages : an intense assessment period prior the MDT meeting, discussion between professionals before the parents come to the meeting and subsequently discussion with parents about the nature of their children's needs. Thus, parents were given an opportunity not only to listen to a summary of all the assessment reports produced for their own child but also to address any questions and make comments on these assessment reports.

The pre- and post-meeting discussions without the parents could be seen as examples of professionalism and exclusion of clients. One professional described the effect of discussions without the young people and parents "It does enforce the 'them versus us' scenario, You know ? It's not an equal partnership thing". Limited level of involvement was observed within the meetings.

Formal MDTs finish with an action plan and evaluate their functions and processes over time

Both MDTs finished with an action plan and, at the end of the meeting, the Chair summarised the main points discussed, the plans for future action, and there was also an allocation of tasks.

As far the evaluation of the formal MDTs is concerned, the effectiveness of these teams can be assessed in two ways, self-evaluation and feedback from the clients/consumers of these teams. As Lacey (1995) rightly argues the evaluation process is a very important criterion for team effectiveness because it offers an opportunity to the team members to consider whether there is a need to abandon, add or change some of their functions or even to change the type of their team. For instance, if the team members in authority A had evaluated their practices they might have decided to include in their existing functions the multi-disciplinary assessment of the children's needs as the MDT in authority B did. However, in practice only in authority B did the team members evaluate their MDT functions and processes and produce annually such relevant reports. It is important here to mention that this might have to do with the fact that the team in authority B was at a pilot stage and, thus, up-dated evidence of the team effectiveness was necessary for deciding whether to expand or abolish it.

Overall, one could argue that although the MDT in authority A fulfilled a few effectiveness criteria it could not be characterised as an effective formal MDT for the following reasons. Firstly, it did not seem to have an elevating goal since the team members were acting in a mechanical way when discussing with parents. Secondly, the meetings were insufficiently prepared as the team members had not always read the

assessment reports for the children discussed and in one meeting they were not even certain about which children were going to be discussed. Thirdly, the MDT failed to promote fairness as it had restricted criteria for referrals to the MDT. Lastly and, most importantly, it did not have evaluating procedures regarding its functions and processes and its functions did not include multi-disciplinary assessment of the special educational needs of young children. In contrast, the MDT in authority B appeared to fulfil most of the effectiveness criteria (had clear goal, the meetings were well prepared, encouraged information-sharing, advice-giving and problem solving approaches, had a collaborative climate, the meetings finished with an action plan and there were evaluating procedures in place). In addition, the MDT in authority B invited the practitioners involved with the children discussed and this was found to be useful for both managers and parents. Last but not least, the MDT in authority B included in its function the multi-disciplinary assessment of the children's needs and, thus, encouraged closer collaboration amongst professionals as well as between professionals and parents and enhanced the possibilities of enhanced (holistic) assessment of the children's needs.

Summary

This chapter started by describing the collaborative arrangements in the three case study authorities. While there was a history of close collaboration between education and social work department staff in authority B, this was not the case in the other two case-study authorities. Differences in collaborative arrangements were related to historical factors, the size and location of the authorities, as well as to the level of resources available in the authority. Although authorities A and B had both formal and informal arrangements, in

contrast to authority C which had only informal arrangements, several differences in their formal arrangements were identified. The most important difference concerned their primary function and, more specifically, the fact that authority B's remit included the multi-disciplinary assessment of children's needs while authority A's did not.

The advantages and disadvantages of formal and informal arrangements as well as the education and social work staff's satisfaction with the existing patterns of collaboration, were also explored in this section. Although most of the education and social work respondents in authorities A and B were content with the existing collaborative arrangements the majority of respondents in authority C were not, and for this reason, authority C was planning to formalise its procedures.

The lack of a multi-disciplinary team for children with special needs in authority C was related to the fact that the authority was sparsely populated and geographically dispersed. Authorities serving small populations tend to have a limited number of services and staff, professionals know each other and often feel there is no need to formalise procedures. But even if the professionals wish to do so (which, as stated earlier, they actually did in authority C), the fact that the authority was geographically dispersed and that it had limited resources made it even more difficult to establish formal collaborative arrangements since this would have involved the provision of transport to parents who would not otherwise have been able to attend the meetings.

In the second section of this chapter the collaborative arrangements in the three case-study authorities were evaluated. The most preferred form of collaborative arrangements was a combination of formal multi-disciplinary teams, involving a mixture of managerial staff and practitioners, and informal arrangements (casual meetings, telephone

conversations and correspondence). Finally, evaluation of the formal arrangements indicated that the formal arrangements in authority A did not fulfil enough effectiveness criteria to be characterised as effective team while those in authority B did so.

Having examined service provision and the collaborative arrangements in the three case-study authorities, we now move on to the core of the study, that is issues arising out of inter-agency collaboration between education and social work staff in assessing children's special educational needs.

CHAPTER 7

CHAPTER 7

INTER-AGENCY COLLABORATION: RESPONDENTS' EXPERIENCE AND PERCEPTIONS AND INTER--ORGANISATIONAL ANALYSIS

Introduction

In this chapter the inter-professional and inter-agency collaboration between educational psychologists and social work staff in assessing children's special educational needs, is examined at two different levels using various sources.

The first section of this chapter explores the respondents' roles, experience of and views on working together with staff from the other department and draws on two data sources. It is mainly based on the analysis of the semi-structured interviews with educational psychologists and social work staff but it also uses some information from the semi-structured interviews with the representatives from the health department and voluntary organisations as well as with the parents of the case-study children. In the second section of this chapter the respondents' data are examined in relation to the theories/models used in this project.

Before proceeding with the examination of the respondents' experiences and perceptions, it is important to clarify that references to distinctions between responses given by education and social work staff or between case-study authorities will be made only where they are noteworthy.

SECTION A: RESPONDENTS' EXPERIENCES AND PERCEPTIONS OF INTER-PROFESSIONAL AND INTER-AGENCY COLLABORATION

The need for and value of inter-agency collaboration

Advantages of working together

Professionals' responses All the education and social work respondents mentioned several advantages of inter-professional and inter-agency collaboration. These responses can be summarised under three headings: professional benefits/benefits for the department, altruistic benefits/benefits for children and their families and personal benefits.

Professional benefits/benefits for the department

The most commonly mentioned professional benefit was *better use of staff resources*. According to the majority of participants such collaborative activities enhanced the understanding of each other's roles, responsibilities, skills and knowledge base. Half of the interviewees reported that inter-professional and inter-agency collaboration *minimised the overlap and fragmentation of services* and, thus, that it was *cost-effective*. As one social worker in authority B maintained:

'In terms of costs and benefits, when people are clear about what is available and who does what, you have more sophisticated planning strategies and you use all the available resources and, as a result of it, you have more opportunities to meet the needs of children locally'.

A quarter of the participants stated that inter-agency collaboration increased awareness of the children with special educational needs in the authority and ensured that no children slip through the net.

Altruistic benefits/benefits for children and their parents

Two inter-related altruistic benefits were reported, that of *'holistic assessment' and effective service provision*. Almost all respondents stated that it was essential to work together because social work staff were aware of the social care needs of the children and their family background whereas the education staff were expert in assessing the children's educational needs.

An educational psychologist in authority B, encapsulated this point of view:

'We get a different perspective on the child, you see the child from different angles. What an educational psychologist looks for is not necessarily what the medics look for or the education department or the social work staff [look for], so it is like completing the various pieces of a jigsaw rather than assessing only one perspective of the child'.

An educational psychologist in authority A, explained the link between holistic assessment and best provision of services:

'It is the fact that although we may be looking at one particular child's assessment it is also because we come from different directions, not only will we see things in a slight different way,

which can only be for the good in sorting out a problem but we will also have different interpretations. I think in terms of the people who are collaborating, when they are in a problem-solving mood you widen the possibilities because people will come up with different suggestions and again when this happens you improve your skills as a professional because you start thinking “Oh, I have not thought of this before”’.

Personal benefits

Three quarters of the participants mentioned personal benefits in the inter-professional and inter-agency collaboration.

Job satisfaction was viewed by the majority of the respondents as the most important personal benefit of working together. Professionals achieved job satisfaction when they saw that children got the best possible resources; when the child's family was satisfied; or when they saw that the possibility of children slipping through the net was lessened.

Three quarters of the professionals interviewed perceived inter-professional and inter-agency collaboration as *a learning experience*. They learnt a lot about communication; they got awareness of their own role and the role of other professionals, they learnt things from the way that other professionals were working, such as the assessment tools that they used, and understood why other professionals did some things; and they got support from each other. A key worker in a Children's Centre in authority A gave an example of *colleague support*:

'When we think that a case does not go anywhere you know that we can lift up the phone and say : «we are struggling here, are there any ways to solve this problem ?»'.

A quarter of the respondents commented that working together *made their job easier and smoother* because they knew whom to contact for different situations.

Parents' responses

Parents' responses were very similar to those of the professionals. All parents interviewed acknowledged the importance of working together and valued inter-professional and inter-agency collaboration.

The majority of the parents emphasised that '*holistic assessment*' of their children's needs resulted in the *best package of services*. In one parent's words: 'When professionals work together they look at the whole needs of my child and they think of all the services that he needs and so in this way my child gets the best care and services'. Half of the parents referred to avoidance of duplication of work and confused messages.

More than a quarter of parents mentioned the additional advantage of *joint visits* because, as they explained, it can be overwhelming to have different professionals at different times at their home and they sometimes felt that they were losing their privacy.

Disadvantages of working together

Professionals' responses In contrast with the previous question, not all respondents from the education or the social work departments could think of disadvantages of different

professionals working together. The disadvantages of inter-professional and inter-agency collaboration can be summarised under two headings: professional drawbacks/drawbacks for the department and drawbacks for parents. Professionals were also asked whether they could think of any personal disadvantage of working together but none of the respondents mentioned any such drawback.

Professional drawbacks/drawbacks for the department

The majority of respondents mentioned that it was *time-consuming* to exchange information and ideas with all the professionals involved in one case and that it was very difficult to organise multi-disciplinary teams because everyone was working under great pressure.

Another common professional drawback reported was that of *blurred professional boundaries*. As one social worker in authority C explained 'the roles can get smudged, blurred and you have to keep asking yourself "is this an education task or a social work task ?". In a similar vein, an educational psychologist in authority A argued that 'some people are not good at seeing the limits in their own role and responsibilities and this can cause conflict'.

A few respondents stated that a disadvantage of different professionals working together is that sometimes *staff in the other department had very high expectations and/or were very critical about how their job should be done*.

Drawbacks for the parents of children with special educational needs

The professionals identified the following two drawbacks of working together for parents of children with special educational needs. First, that *differences in opinion between professionals in the multi-disciplinary team meetings were often confusing for parents* as they do not know whom to believe and how to react and, second, that *information sharing between professionals was sometimes threatening for them*.

Parents' responses

Parents' accounts of the disadvantages of different professionals working together were very similar to those given by professionals.

Several parents said that they felt awkward and confused when there were differences in opinion between professionals in the multi-disciplinary team meetings. In one parent's words:

'The disadvantages as well can be *too many different opinions*. One person could think one thing and another person could say completely the opposite ... I have actually experienced it ... "it throws you". I am actually going to see a private specialist now, because I had so many different opinions. I still do not know what is wrong with Sarah ... I had a few [specialists] ... , who say that she is autistic. However, I had other people who say she is not autistic. I had other people saying that she has a severe receptive language and development disorder ... I think it is very important

to know what is wrong with Sarah ... in order to be able to start reading about her needs and to try to help her'.

As far as information sharing is concerned, a quarter of the parents was not conformable with the exchange of information between professionals because they were *never sure about the limits of confidentiality*, that is about what information is shared between professionals and what is not.

The following quotation highlights parents' concerns about this issue: 'The information-sharing between professionals is scary because you may see one professional for first time and you get the impression that he/she knows everything about you'.

One parent identified the following drawback of inter-professional and inter-agency collaboration:

'Sometimes they form an ally, they support each other about the way that they should talk to me and I have two people at the same time to criticise me and interfere in my life. For example, they may not like the way that I speak to Stewart and they may decide to change my attitude and they both say the same thing to me and so they put a lot of pressure on me. I find this situation really unpleasant'.

Ease of collaboration

Although almost all the respondents both in education and social work departments in the three case-study authorities reported that their aims were similar, there were differences

in opinion as to the whether their focus and perspectives were matching, in assessing the special educational needs of children under 5.

The common aims mentioned were that staff in both departments assessed children with special educational needs in order to understand their strengths and disabilities and enabled them to progress. In addition, both attempted to provide the best 'quality services' for these children. This term referred to the professionals' effort to offer individualised packages to children because only these kind of packages offered services that acknowledged and suited the needs of the children.

Some respondents claimed that not only were their aims similar, to those of the staff in the other department, but also they adopted the same perspectives. Examples given were that they were both in favour of mainstreaming, tried to involve parents in decision-making and to work in partnership with them, were child-centred and used the social/sociological model.

On the other hand, many respondents from education and social work departments described a completely different situation and were keen to offer examples that contradicted the above statements. It is important here to mention that when a contradictory picture was given by professionals working in the same authority and especially by professionals in the same occupation, the researcher used to mention this to the next interviewee, without giving the names of the informants, and asked his/her opinion about this. The most common reaction of the respondents was to give some examples which demonstrated this situation.

With regard to the placement issue, respondent's views differed considerably. As stated earlier, several education and social work respondents argued that they both favoured mainstreaming whereas others said that it really depended on the situation because mainstream schooling was the best option for some children whereas other children's needs could best be met in special schooling. In addition, a few social work respondents claimed that they favoured mainstreaming whereas education staff still preferred special schools.

Similarly, the respondents' views about parental involvement varied. Although both education and social work respondents agreed that social work staff always worked in partnership with parents, there was some disagreement as to whether educational psychologists always did so. A few respondents from both groups reported that educational psychologists worked in partnership with parents whereas the majority reported that they did not. Many educational psychologists explained that, although their role involved working closely with the parents of children with special educational needs they usually did not have sufficient time to do so. Some of them confessed their frustration about this situation and expressed a wish to be allocated fewer cases in order to be able to carry out their responsibilities adequately.

As far as the focus in the assessment process is concerned, some respondents claimed that they both were child-centred while the majority reported that the social work staff was family-centred and the education staff was child-centred. As in the issue discussed above, there were no differences in opinion between education and social work respondents as to whether the latter group was family-centred. Thus, respondents'

opinions only diverged over the focus of educational psychologists. The following quotation from an educational psychologist in authority A demonstrates this situation:

'I would hope that our aims and values are the same ... We have similar values but sometimes the social work staff are involved with the whole family and they have different views about what is best. This is hypothetical situation, may explain what I mean. Say that a social worker felt that parents are under great pressure and the right thing would be for the child to have a full-time school placement. From their point of view that would be helpful for the mum and for the family but you could be looking at just that child's point of view and saying "O.k. my concern in that case would be that the child and the family are going to become a bit isolated and in the longer term the answer may not be to try to help the mum", so in that case, the education staff is looking [at it] from the child's point of view'.

Lastly, differences in opinion were also identified as to the perspective adopted by education and social work staff. Although some respondents reported that they had similar perspectives and, more specifically, that they both adopted the social model in their daily practice, several social workers reported that educational psychologists still used the medical/individual model since they often focused on the child and neglected societal factors that influenced child's life. However, several educational psychologists explained that they would have liked to assess the overall needs of the children and to

work closely with their parents but their workloads often restricted them to an assessment of the educational needs of the children.

In the remainder of this chapter it will be shown how differences in the focus and way of working affect both the quality and frequency of such collaborative activity.

Professional roles

Key players in the assessment of special educational needs

As explained in chapter 1, close collaboration between medical, educational and social work professionals in identification, assessment and provision for children with special educational needs was recommended in the Warnock Committee Report (1978) and was subsequently incorporated into the Education (Scotland) Act 1981.

Evidence has shown that although a range of professionals from the **education** (home visiting teachers, nursery teachers, education officers and educational psychologists), **health** (GP's, nurses, paediatricians, occupational therapists, physiotherapists, health visitors, speech and language therapists) and **social work departments** (day-care staff, social workers and service managers) might be involved in this field, the key players are paediatricians and educational psychologists and the latter professional group have the leading role (Goacher et al, 1988; Galloway et al, 1994; Thomson et al, 1991).

Tomlinson (1982) has discussed the gradual shift from medical to educational dominance. In 1886, two categories of handicap were recognised, 'idiot and imbecile' and in 1889 the physical categories of 'blind, deaf and epileptic defective' were added to

them. The Education Act 1945, introduced three degrees of educational subnormality 'severe, mild or moderate'. The Education (Scotland) Act 1970 established the principle of the educability of all children, regardless of the nature or severity of their handicap. However, with the passing of the Education (Scotland) Act 1981 categories of handicap were formally abandoned, although a number of descriptive terms of learning difficulties (mild, moderate or severe), physical/sensory impairment and social/emotional/behavioural difficulties continue to exist.

The ground has, therefore, switched from the depiction of handicap as a medical problem to an educational problem and educational psychologists now occupy a dominant position in this field. In addition, although educational psychologists are strongly linked to the medical profession in terms of their grounding in theories of biological determination, they have replaced medical perspectives with educational ones which emphasise the educability of particular individuals and the importance of environment in either mitigating or stressing the effects of disability (Thomson et al, 1991).

In sum then, although educational psychologists should be **one** of the key players in the multi-disciplinary assessment of children's special educational needs, their specific professional training has established them as the leading experts in this field and given them power not only to co-ordinate these procedures and offer advice on the nature of children's special educational needs but also to make recommendations on how these needs should be met.

Before proceeding with the description of the role of the two groups of professionals (educational psychologists and social work staff) examined in this thesis it is instructive

to note the data sources used in this section. The educational psychologists and the social work staff participated in this study, were asked to describe their role as well as the role of the other department staff (i.e. educational psychologists were asked to describe both their role and the role of the social work staff) in the assessment of special educational needs of children under 5. In addition, the voluntary organisation and health department representatives, involved in the formal meetings in authorities A and B (as explained in chapter 6, authority C did not have formal meetings), were also asked to describe the role of these two professional groups in the assessment of children's needs.

The role of the educational psychologists in the assessment of special educational needs

Educational psychologists' description of their role in the assessment of special educational needs of children under 5

An analysis of responses to the question on educational psychologists role indicated that the majority of professionals interviewed (social work staff, health and voluntary organisation representatives) and educational psychologists themselves regarded them as the professional group playing the major executive role in assessment and recording. The practice in the three case-study authorities was for the psychologists to initiate and co-ordinate the assessment and Record of Needs procedures, convene multi-disciplinary teams, liaise, to some extent, with parents and decide on, or more properly, make the recommendations for the school placement for these children.

There was little consistency among educational psychologists as to the methods used in assessing children's special educational needs or concerning the duration of the assessment period. Some educational psychologists emphasised the need for working closely with parents and observing the children in different contexts (both at their placement and at their home) over several weeks. However, others stressed the need for assessing them in as short a period as possible in order to complete their assessment reports before the deadline and to meet the needs of these children as promptly as possible. Several educational psychologists explained that one way of making the most effective use of their time was to balance the time spent in carrying out their own assessment with the time spent working with other professionals involved with these children. More specifically, if the various assessment reports, including their own assessment, produced a coherent picture, then the educational psychologists felt that they had got it right and that there was no need to spend additional time observing the child and discussing the child with his/her parents.

Several educational psychologists explained that a standard way of working was not desirable because the assessment procedures needed to be flexible in order to take account of different situations such as those described in the following three paragraphs.

When the children were very young (less than 3 and a half years old) or had severe learning difficulties, some educational psychologists did not use standardised assessment tests but, instead, preferred to use a number of different games. However, there were occasions where they felt the need to leave the assessment for later on when the children would be older.

When the educational psychologists already knew the children being assessed they usually did not spend a lot of time in assessing these children's needs as they were already familiar with them and had already informed the family about alternative forms of educational provision.

When the educational psychologists were asked to initiate a formal assessment for children who were almost 5 year old and they were about to enter primary school, they had to carry out their assessment in a very short period. In such cases the educational psychologists may have been left little choice but to observe these children only once at their placement and maybe once at home. The educational psychologists sometimes decided that there was not enough time to collaborate with all the other professionals involved with this child and, thus, they had to rely on their own assessment report alone.

However, even when there was enough time to observe children in different contexts, this was not always feasible. Some educational psychologists reported that the home visits were neither very easy to arrange nor very useful. Parents sometimes did not favour the idea of home visits and encouraged the professionals to carry out their assessment at the child's placement. However, on some other occasions, children themselves did not appear to be pleased with the presence of visitors or were unwilling to co-operate. Similarly, the social work staff did not always like the educational psychologists visiting the day-care services to assess the children without an appointment and it was sometimes difficult to arrange a time mutually convenient.

How clear was the role of the educational psychologists to the social work staff

Day-care staff seemed to have a clear view of the role of the educational psychologists since they described it in ways similar to those offered by the educational psychologists themselves. However, this was not the case for social workers. As explained in chapter 6, social work practitioners did not usually work with pre-school children with special needs and they seldom collaborated with educational psychologists. Thus, it is not surprising that many social workers were unable to elaborate on the role played by the educational psychologists.

According to the majority of the social work staff (both day-care staff and social workers), the educational psychologists' role included working closely with all the professionals as well as with the parents in order to reach a conclusion as to the children's special educational needs. With regard to parents, the day-care staff thought that the educational psychologists' role was to explain to the parents about the available educational resources and take them on visits to various placements in order to be able to make an informed choice. A few day-care respondents stated that this was imperative because it was pointless informing parents about the available alternatives without giving them a chance to see them. A quarter of the day-care staff noted that the educational psychologists' role also included consultation with parents about how to handle their children and how to help them with their education. However, according to three quarters of the day-care staff, the majority of the educational psychologists spent little time with parents, usually one or two home visits, and they often had to explain the role of the educational psychologist to the parents .

Although the above paragraph indicates that the day-care staff had a fairly clear view of the role of the educational psychologists, almost all noted that this included the decision-making concerning the school placement for these children. However, as explained in the beginning of this section and emphasised by many educational psychologists, they only made recommendations for the educational provision for these children and education officers made the decisions.

In order to explore the reasons underlying these responses, one quarter of the day-care staff in each authority who participated in the study were asked what they meant by decision-making (social workers were not included because most of them did not mention this issue). The majority of those respondents reported that although, in theory, the educational psychologists only made recommendations and the education officers were the ones who actually made the decisions the education officers only very rarely disagreed with the educational psychologists' recommendations.

The role of social work staff in the assessment of special educational needs

Since the role of the day-care staff differs, to some extent, from that of the social work practitioners, their role is examined separately.

The contribution of day-care staff in the assessment of special educational needs

Day-care staff's description of their role in the assessment of special educational needs The day-care social work staff in authorities A and B operated in similar ways and the day-care staff's description of their role likewise was similar.

When a child entered the day-care services, the staff undertook a 'base line assessment' which meant a comprehensive/holistic assessment. This offered a snapshot of where the child was and highlighted the areas that they needed to work on. The staff saw their role as achieving each child's potential and for this reason they had regular team meetings where they made an 'Individual Educational Plan' for every child. All children were reviewed every six months and the professionals involved with the children were invited to attend these review meetings.

If the day-care staff had any concerns about the learning development of a child, they contacted the educational psychologists and arranged a time for them to carry out an assessment. When the educational psychologists did come, they usually observed the child directly in the playroom, and discussed their observations with both the day-care staff and the manager.

Day-care staff reported that the educational psychologists usually asked them about the children's needs, their progress, and what they thought about their future plans. Day-care services managers mentioned that they usually discussed with the educational psychologists the future placement of these children.

How clear was the role of the day-care staff to the educational psychologists and importance of their role Educational psychologists appeared to be very clear about the role of the day-care staff as they described their role in a similar way to that given by day-care staff themselves. When the educational psychologists were asked, in the children's case studies, to comment on how important the role of the day-care staff was, the majority reported that the role of the day-care staff was very important and their help was particularly valuable, because they were able to provide them with updated information about the child and the family and to offer support to the parents.

The contribution of the social workers in the assessment of special educational needs

All the social work practitioners in authorities A and B who collaborated with educational psychologists, in assessing children's special educational needs, were working in 'children and families team' (see chapter 6). These teams covered children up to the age of 16 and the social workers had varied caseloads. The issues that they dealt with varied and included child protection issues, residential care, adoption, fostering, working with children on supervision orders as well as children with special needs.

In contrast to authorities A and B, educational psychologists in authority C did not collaborate with social work practitioners in 'children and families team'. Instead, they collaborated often with social workers in 'children affected by disabilities team'. Thus, educational psychologists collaborated with social workers in authority C only for children whose special educational needs were related to some type of disability (e.g.

physically or mentally disabled children) and not for all children with special educational needs (e.g. children with dyslexia or social, emotional and behavioural difficulties) .

Social workers' description of their role in the assessment of special educational needs

More than a quarter of the social workers interviewed in authorities A and B expressed some uncertainty about their role in the assessment of special educational needs. The reasons for this are well summarised in the following two quotations by managerial staff in authorities A and B :

'With so much re-organisation all professionals are confused and do not know what happens in our department let alone in other departments. We feel the need for co-ordination and collaboration but still we are not ready for this. We need first to increase intra-departmental communication and co-ordination. There have been so many changes the recent years for cost-effectiveness reasons... Take my post as an example. Three weeks ago I was a Practice Team Manager and now I am a Service Manager and this, in practical terms, means that I am the 'boss' to colleagues who used to have the same position. Our department did not make anyone redundant but reallocated our positions Another issue is that social work staff are not used to the new role and sometimes they are anxious assessing the children's needs, especially [those] of children with special needs. They usually assess the adult's needs rather than the children's needs. In addition, it is difficult for them to separate the children's needs from their families' needs. This is something that has to be developed'.

The majority of the social workers described their role as having to assess the social care needs of the children and their families and this included the offering of information to the educational psychologists about the family structure, dynamics and other important issues affecting the child's life (the information-sharing issues are discussed in the following sub-section). Several social work practitioners in the three case-study authorities mentioned that they often acted as advocates in support of children and their families and this sometimes brought them into conflict with educational psychologists (this issue is discussed below).

Members of the children affected by disabilities team in authority C worked with disabled children and their families at a very early stage. They were usually introduced to the family as part of the child care plan team and had telephone contacts with them every six months (for child care plan teams see chapter 6, sub-section 'description of the informal teams'). They also worked closely with the educational psychologists. The children affected by disabilities team members' description of their role was very similar to that of the social workers in authorities A and B.

How clear was the role of the social workers to the educational psychologists and importance of their contribution to the assessment of special educational needs

As with day-care staff, almost all the educational psychologists appeared to be very clear about the role of the social workers and were able to give a detailed and accurate description of their role.

A quarter of the educational psychologists interviewed claimed that the contribution of the social workers was very important, more than two quarters stated that it was important, whereas less than a quarter thought that it was minimal. The following four quotations demonstrate situations where the contribution of the social workers was thought to be very important and where it was less so.

An educational psychologist in authority A reflected on a case where she worked with a social worker for Pamela and Jessica, who were 4 years old twins and had cerebral palsy. She said that the contribution of the social worker was very important in that case because the social worker was able to give her a lot of information about the children's and the family's needs and she once represented her at a multi-disciplinary team she could not attend. She said that

'She had the hard job to co-ordinate the Child Care Plan ... She said to me "I do not want to write anything down that I have not checked with you first". After the meeting she called me because she was writing the report of the meeting and she wanted to be sure that she got it right I suppose I could have sent a report' (*these children are discussed again in this section as well as in chapter 8*).

In authority B, an educational psychologist commented on Peter's case where she worked for a long time with a social worker. Peter had mild learning difficulties and was in foster care. The educational psychologist said that the role of the social worker was tremendous in that case because she explained the family situation and what the child had been

through (the mother had learning difficulties and lived a rather promiscuous life and there was some suspicion that the child had been sexually abused by one of the mother's partners). In her own words 'her help was valuable because she kept me informed about the social care issues of the child and invited me to attend all the child care plan meetings'.

An educational psychologist in authority C, recalled a case where she worked closely with a children affected by disabilities team member over Christine, who had severe disabilities and her mother had a mental disorder.

'That was a case where the role of the social worker was very important because the mother was rather aggressive and I could not handle her alone, whereas the social worker seemed to have a good relationship with her. Thus, we had a joint home visit and without her help I would not have managed to discuss the child's needs and how best these could be met with the mother'.

The same professional discussed another case where the role of the children affected by disabilities team member was not as important at the formal assessment because James was attending a placement outside the authority (James had visual impairment and there was not special educational provision in authority C) and his mother preferred to use the help and support of the social work staff at the placement. However, the educational psychologist explained that the social worker had played an important role at an earlier stage, because she made the referral and provided her with information about the child and the family (for summary of the data on case study children see Appendix 2.5).

Other professionals' description of the role of the social workers in the assessment of special educational needs

The voluntary organisation representative in the multi-disciplinary team in authority A as well as the health representatives in the formal multi-disciplinary teams in authorities A and B emphasised that social workers played a low-key role in the assessment process as they did not usually get involved at an early stage in the children's life (this finding was also confirmed by educational psychologists and social workers themselves).

Overlaps in the roles of education and social work staff

Although the participants almost unanimously reported that there was some overlapping in their roles, (they both assessed the children's needs and offered support to their families) their opinion diverged as to whether this overlapping was useful. Not only were there differences in opinion between educational psychologists and social work staff but also between professionals in the same occupation.

Three quarters of all participants argued that the overlapping of roles was useful because it ensured that they did not miss anything important and were able to check whether they had noticed the same things. In this sense they complemented each other. The respondents also noted that overlapping ensured that the holistic needs of the children were assessed and that the most appropriate services were offered to them and their families. On the other hand, one quarter of the participants claimed that the overlapping was not useful. First, it created blurred boundaries; second, it was confusing for parents since it was difficult for them to figure out who was doing what; and third, it sometimes

led to duplication of work such as when two people gave to parents the same piece of information.

Parental satisfaction with the contribution of the educational psychologists and social work staff

Although the majority of parents were happy with the contribution made by day-care staff and social workers for different reasons (day-care staff were taking care of their children on a daily basis whereas social workers helped them in practical issues such as benefits, respite care and home care), more than half of the parents were dissatisfied with that of the educational psychologists. A quarter of the parents interviewed noted that social work staff played the role of the mediator with the educational psychologists and tried to convince them that they should consider their needs and preferences. A few parents used expressions like 'the day-care staff saved my life', or 'I do not know what I would do without the social worker's help', to show the importance of their role in both the assessment process and delivery of services.

It is pertinent here to mention that it was not always clear whether the source of parental dissatisfaction with educational psychologists lay in their perceptions of how they had been treated by educational psychologists or whether unsatisfactory outcomes had coloured their view of the educational psychologist role. Armstrong (1995) in his case studies with children with emotional and behavioural difficulties reached a similar conclusion.

Half of the parents reported that they were not sufficiently informed by educational psychologists. The educational psychologists did not explain their role to them and they did not discuss the aims and the procedural issues related to the assessment (eg. assessment stages) and recording process with them. In addition, many parents reported that the educational psychologists did not explain to them how they could get involved in the assessment process. Lastly, more than a quarter of the parents noted that the educational psychologists did not take account of their opinions and preferences.

At this point it is important to mention that, on several occasions, there was a mismatch between what the parents said that the educational psychologists did (or did not do) and what the educational psychologist reported that they did (or did not do). Examples of such situations are presented below (the first example is from authority B whereas the second from authority A). It is impossible to say who is right : the point to note is the disagreement between the parents and the educational psychologists.

Case 1 : Parents' perceptions of the contribution of the educational psychologist

‘She [the educational psychologist] did not explain to us what her role was and that's the same for all professionals involved with Stewart. They assume that we know who they are and what they are doing. We had to have a struggle to get her to start working with him and to give us an assessment. Until recently when the doctor told us that Stewart is autistic, we did not have a clue what was problem with him. The doctor was suprised that the educational psychologist had not informed me about Stewart's

needs I think that the educational psychologist could have said something to us earlier, she sees so many other children, she could diagnose autism very easily but for some reason she did not want to do so’.

Educational psychologist's perception of his contribution

‘The paediatrician had referred Stewart ... in the summer or had intended to refer him during the summer but there was either an administrative problem in the hospital or something wrong with the post. When I received it, it was not until his follow-up Review in October-November ... So, obviously that made it short notice for me in many ways because the paperwork had to be ready for March and I like my assessment to be a bit longer than just one-two off visits I went to the Children Centre twice and the rest was telephone contacts when it was needed I also went to his home once and did observation and discussed with the parents. The visit was very valuable because he is different at home, which was very valuable for my assessment and recommendations’.

Case 2 : Parents' perceptions of the contribution of the educational psychologist

‘[The educational psychologist has done] ... nothing for my children. She assessed Rebecca’s and Jessica’s needs about two months ago “What did she do before ?” Not turning up to

meetings, not answering phone calls, not being helpful at all in our opinion I can not remember when I first met her. She went to see them in the nursery, I really ca not remember’

Educational psychologist's viewpoint of his contribution

‘I first saw them when they were quite young, one year old I assessed them when they were two years and nine months old. I went to a meeting in September 1997 It was a Child Care Review meeting I have attended three meetings ... Two were a Child Care Reviews and the last one, last week, was education meeting in the school I did not make it to the last one [Child Care Review meeting] ... Unfortunately, it was the day I do not work so I was not able to attend “A Record of Needs for these two ?” No, the parents have not actually requested [one]. There have been so many other things to sort out ... which surprises me because a friend of theirs who has got a young child with special needs has asked for a Record of Needs, but these parents at the moment have not requested one They will probably do so later on or otherwise I will mention it to them....’ (*these children are also discussed in chapter 8*) (for summary of the data on case study children see Appendix 2.5)

Frequency and duration of the collaborative activity

Awareness of social workers' involvement and criteria for collaboration

Educational psychologists in the three case-study authorities were asked if they always were aware of social workers' involvement when they were assessing children's special educational needs and if they did not, how they found out about this (educational psychologists were always informed about day-care staff's involvement because the referral included the child's placement) .

Several educational psychologists noted that, on some occasions, parents informed them about the social workers' involvement, although, in many cases, the parents appeared to assume that there was collaboration between them and, therefore, that they already knew about this. As a matter of principle, educational psychologists avoided asking the parents directly. The explanation that was given for this was that social workers' involvement was a private issue as their involvement did not always concern the children's needs. They, instead, tended to ask 'who else is involved with your child' and, thus, it was up to the parents to decide whether to inform them. Some educational psychologists said that they usually contacted the professionals who made the referral in order to check who else was involved.

The educational psychologists in the case study authorities, were also asked whether they always collaborated with social workers when they knew that they were involved with the children being assessed. Those who replied that they did not always do so were then asked to mention the criteria used to decide whether they would collaborate with them.

All the participants in authority A stated that there were many occasions where they did not collaborate with social workers even when they were aware of their involvement and that sometimes they did so because social workers initiated the collaborative activity. By way of contrast, the interviewees in authority B mentioned that they often collaborated with social workers when they were aware of their involvement but not with the same frequency as with day-care staff (educational psychologists in authority C collaborated with social workers only for children with disabilities, see chapter 6, sub-section 'range of professionals involved in the inter-agency collaboration').

When the educational psychologists in the authorities A and B were asked to report the criteria for deciding whether they would collaborate with social work staff, the majority explained that they were not informed of any local written guidelines which stated explicitly in which cases they should definitely collaborate with them. Nevertheless, most of the educational psychologists in authorities A and B seemed to have constructed their own criteria. They reported that they **almost always** collaborated with social work staff under the following 7 circumstances: in child protection cases or for children on Supervision Order; in foster care cases; for severe/complex cases (severe disabilities and/or complex family situation); when the families needed benefits or respite care; when the children attended day-care social work services; when parents asked them to do so; and when the parents could not provide them with information. The three most common cases mentioned were children who attended day-care social work services; children on supervision Order; and children with severe/complex difficulties.

The majority of educational psychologists in authorities A and B, said that they could not think of specific cases where they would definitely not collaborate with social work staff. However, some educational psychologists mentioned that they would **definitely not collaborate** under the following two circumstances : if the parents asked them not to do so; and when the social work staff's client was the parent, or the family as a whole, and not specifically the child.

Duration of the collaborative activity

The study found that the collaborative activity between educational psychologists and day-care staff in authorities A and B was not only more frequent but also more long-lasting than that between educational psychologists and social workers (as was shown in chapter 6, day-care staff in authority C did not collaborate with educational psychologists).

The majority of the educational psychologists mentioned that they usually saw the children 3-4 times when they assessed their special educational needs. They also stated that they preferred to assess them in their placement because in that way they could see them interacting with other children and the workers. The educational psychologists had also the opportunity to exchange information with the day-care staff and the manager in the review meetings which took place every six months. The most common case in the children's case studies was that, overall, educational psychologists saw the day-care staff four times during the formal assessment and they also had several telephone contacts.

By way of contrast, the educational psychologists almost always saw the social workers in informal or formal multi-disciplinary teams and very seldom alone (for informal and formal teams see chapter 6). However, in some cases they had only telephone contacts and/or correspondence (particularly in authority C). The most typical case in the children's case studies was that the educational psychologists saw the social worker only once.

The impact of the Children (Scotland) Act 1995 on the frequency of collaboration

As explained in chapter 1, the Children (Scotland) Act 1995 stresses the importance of inter-agency co-operation (collaboration between education, health and social work departments) and requires these departments to assess children's needs jointly. In order to explore the impact of the Act in the frequency of collaboration between educational psychologists and social work staff, the participants were asked whether their collaborative activities had been increased after the enactment of this legislation.

The replies to this question can be summarised under three headings : mandatory collaboration increases the frequency of collaboration; mandatory collaboration does not influence the frequency of the collaboration, and increase in the frequency of the collaboration is influenced by a number of factors.

Before presenting these findings it is important to emphasise that this study was conducted only a few months after the implementation of the Children (Scotland) Act 1995. According to several authors, included Goacher et al (1988), the first few years after the enactment of legislation represent a transitional period, during which time the

managerial staff in the respective departments are having a series of meetings in order to work out local policies to implement the new procedures, and, thus, no changes at the ground (practitioner) level are expected to take place. A finding of no change in the frequency of collaboration may, therefore, be attributed to the fact that the Act had not been fully implemented at that time.

Mandatory collaboration increases the frequency of collaboration

A quarter of the interviewees reported that they had noticed and/or experienced an increase in their collaborative activity with staff from the other department. Several respondents from both departments stated that they had started getting more invitations from the other department staff to participate in their multi-disciplinary teams (for informal and formal teams organised by these departments see chapter 6). Managerial staff in the three case-study authorities also reported that the meetings with managers in the other department had been increased because they were organising joint training and discussing the possibility of joint initiatives.

Mandatory collaboration does not influence the frequency of collaboration

The majority of respondents reported that they had not been aware of, or experienced changes, in the frequency of collaboration since the implementation of the Act. Many of them thought that it was too soon to tell whether mandatory collaboration would influence the frequency of collaborative activities because the Act was still new and their department had still not produced local guidelines. A few respondents were more specific

about this and estimated that it would take about a year until changes at the ground level would start taking place.

However, many social workers expressed their doubts as to whether the Act would increase collaboration with educational psychologists because, as they explained, educational psychologists had their own priorities and collaborated with them only when they knew that they had been involved with a child being assessed and his/her family for a long time.

Increase in the frequency of collaboration is influenced by several factors

Less than a quarter of the interviewees commented that it was difficult to tell whether the increase in the frequency of collaboration that they had recently experienced was directly related to Children (Scotland) Act 1995 because they were in a transitional period in which so many changes were taking place and some of them had been planned a long time previously. Several respondents stressed the fact that this legislation was not the first one that has attempted to encourage closer collaboration between education, health and social work departments in assessing the children's special needs (see chapter 1).

Many respondents claimed that the law could only encourage good practice but not ensure it because one major problem with mandatory collaboration concerns adherence to the mandate as the following two quotations illustrate. The first quotation is from a social worker in authority C and the second in from an educational psychologist in authority A :

'I do not think that there has been any dramatic change. We were building on it. I do not think that legislation has forced us into it. We were developing and working on it anyway I think that the difference the Act has made is more of a political difference in that reports that have gone either to the Education or Social Work Committee have taken into account our obligations and duties under the Act. So, in this way we are backed up. I think that the MDT meetings were happening or were beginning to happen much more even before the Act come in last year and that's a matter of good practice. ... The Act has underpinned ways that we were developing anyway. Perhaps, [it] gave us more political clarity to pursue areas that we were hoping to pursue and gave us money to do this ... because if we want to do things we need to be supported'

Whether more contact would help

In contrast with the previous questions, where the responses in the three case-study authorities were similar, in this question there were differences in the responses given in authority B compared to those offered in authorities A and C.

The majority of the respondents in authority B reported that they did not need greater contact with the other department whereas most of the respondents in authorities A and C, and particularly social workers, said that they would like to have closer collaboration with educational psychologists.

The reason for these variations lies in differences in the frequency of collaboration and range of people involved in such collaborative activities between the three case-study

authorities. As explained in the previous chapter, there was a history of close collaboration between education and social work department staff in authority B and it was more common for social workers to collaborate with educational psychologists than in authority A (as explained in chapter 6, in authority C, educational psychologists collaborated only with children affected by disabilities team members).

Half of the day-care staff in authorities A and C reported that there was a need for greater contact both with educational psychologists, home visiting teachers and teachers in the nursery schools and classes. The following comment is typical :

‘I believe that no matter whether the collaboration is mandated or not, unless both sides wish to change the current situation no radical changes would take place. There may be some changes in the structures or in the local policy documents but it is difficult to check whether changes in the ground level have occurred or whether there is consistency’.

Three quarters of the social workers stressed the importance of working together with educational psychologists at an early stage and for all children with special educational needs and not just for specific cases.

The majority of educational psychologists reported that they would like to increase their contact with social work staff (both day-care staff and social workers) but a number of obstacles inhibited this. The following two quotations illustrate this situation :

'If I spent all my time working only with under 5's, I would certainly have [greater contact] but I think that the difficulty is that you are always balancing the demands made on your time and the time you have available and the best possible advantages you can get and I do not think that with the way that I work just now that more time with under 5's would actually help me, particularly, with the deadlines Inevitably, other demands will come in if I had more time spent with say staff in the Children's Centre. There maybe things that would come up that they [Children's Centre staff] would like to share with me but it would not have to do with the immediate children or whatever, it would be really positive but it would be another demand on my time'. **Educational psychologist (Authority A).**

'I think that there is a need for more regular collaboration especially with Children's Centre staff but the problem is that we are short of staff and we do not have enough time to do it. I am sure that there are children who slip through the net and we need to do something about it. There is a need for earlier identification and closer links at the early stage. Social work staff are usually involved at a later stage and this should change'
Educational psychologist (Authority A).

A few respondents in the three case-study authorities stated that the situation differs depending on the individual worker, because, as they explained, some people seem to be 'more professional' or 'more conscientious and punctual' than others.

Information sharing issues

Education and social work respondents were asked what kind of information they were sharing and how far they could share information. The issues cluster under two headings : factors influencing information sharing and level of satisfaction with information shared.

Factors influencing information-sharing

The most often cited factor was that of *confidentiality* although its relevance for information sharing was understood in different ways by different respondents.

One quarter of the respondents from both departments believed that **all** the information could be exchanged on the condition that professionals had obtained parental consent and that they would use this information for the best benefit of the children and their families. Thus, some respondents argued for 'group confidentiality' on the grounds that workers were responsible professional people who needed to be aware of the children's circumstances in order to make an accurate assessment of these children's needs.

Less than a quarter of education and social work respondents held the opposing view of confidentiality. These participants claimed that information, given in confidence by a client to a particular professional, should be respected and should not be shared with other professionals. A typical comment by social work staff was that it was really difficult to build a trusting relationship with their clients and that they were not willing to put it at risk by breaching confidentiality.

Given the constraints of confidentiality, the main concern of the majority of the social work respondents was not how to share all the information but to share *enough*

information. This involved an assessment of how much was enough and the most commonly reported measure for this was 'relevant' information or, in other words, information could be shared on 'a need to know basis'.

Educational psychologists did not appear to be particularly concerned about the information that they passed on to the social work staff because, as many explained, they did not have anything to hide. This was, in part, because it was not common for them to possess confidential information about children and/or their family. They usually informed the social work staff verbally about the development of the children and their anxieties about their progress. Some educational psychologists also discussed alternative educational provision with social work staff.

The majority of social work staff (both day-care staff and social workers) thought that they were able to pass on enough information within the bounds of confidentiality, mainly by presenting it in a generalised way. For example, in the case of intrafamilial physical abuse, the social work staff could say to the educational psychologist that the father was sometimes aggressive. The most common case, however, was that social work staff were willing to give information to the educational psychologists only when they had parental consent to do so. In these cases, they usually gave educational psychologists general information about the family history, structure and dynamics as well as information about the children's strengths and weaknesses. However, in some cases the social work staff felt that they had to pass specific, private information to the educational psychologists because this type of information was likely to affect decisions about the provision of services to these children. The following quotation is an example of such a

situation. A social worker in authority A who was working with Zane, a child with complex/multiple difficulties of Pakistani origin (global developmental delay, physical disabilities, profound hearing impairment, no language) noted that she had to pass a great deal of information to the educational psychologist having first ensured the mother's permission because

'The family situation seriously affected the child. The father is well off but he does not want to have anything to do with the child and so he does not want to give money for his son. I tried to pass this information very sensitively to the educational psychologist, just to give her to understand why the family cannot provide for the child although they are well off. So, I passed the information to the educational psychologist about the family background and the family dynamics, which means where the child is living and under what circumstances, what the parents do, how many children in the family, contact with the extended family and some other issues that affected the child's life such as his ageing grandmother, who has dementia, and this compounds to the whole situation. It is a lot of work for one person, the mother in this case, to have to look after two dependent persons and the other children' (*this child is also discussed in chapter 8*) (for summary of the data on case study children see Appendix 2.5).

Another factor influencing information sharing was the *potential misuse of information sharing*. The possibility of educational psychologists misusing information led some day-

care staff and social workers to make individual assessments of colleagues in order to decide whether to provide information. As one day-carer explained, it depends on the individual 'you trust some educational psychologists and you confide to them a lot of information whereas with others you would not tell as much because they are either not trustworthy or not sensitive to family problems'.

Satisfaction with information-sharing

As shown above, confidentiality was seen as an issue where it involved the social work staff sharing information and, thus, there was a general feeling of 'one-sidedness'. This divulging of information led often to some feeling of dissatisfaction among educational psychologists as the following quotation from an educational psychologist in authority A demonstrates.

'I do not exchange a lot of information with social work staff because they seem to be very reluctant and sceptical about this and they pass on to me only the basic, absolutely minimum information, things that I usually know. Only when a meeting is due shortly they call me to inform me about the child and the family in order to prepare me but only when they have to do so, otherwise they do not. I feel this is not right because I need to know about important incidents that affect the child's life like a death in the family or intra-familial violence'.

However, several other educational psychologists were content with the amount and type of information shared with the social work staff (both day-care staff and social workers).

A typical response is as follows :

'They [social work staff] usually give me ... their own assessment information ... but also background information about the child and the family, and information about whether the child is with his mother all the time or if there other carers too ... in order to know what kind of environment the child is growing up in I think they probably tell me things that the parents, or some parents, would not like me to know about. I think they do this knowing that it is important for me to know about it. They would not just gossip. They are professional enough not to give me information that they hear somewhere or that they are aware of that it has nothing to do with the child ... The parents might would feel that a bit uncomfortable if they knew, but they probably think this is happening anyway, parents are not stupid. Information that I get from them is marital problems within the family, physical violence between mum and dad ... that can have a great impact on children's emotional development, or where mum or dad have problems with alcoholism ... I am really not suggesting that social workers give this information freely but they are aware that as I am assessing the child I need this information to put the child's difficulties in context and they are very good at that. [They] just give me the information I need When a child is behaving in a certain way you think "I wonder if ..." I have not had any difficulty having to ask for information

and them responding "You should not know that or that's nothing to do with you" that sort of thing. Usually when I say "something like this seems is going on ..." they say to me "Oh, yes, we should have told you that the parents are getting divorced or whatever"' **Educational psychologist (Authority B).**

The last comment shows that some educational psychologists were not aware that before social work staff share information with other professionals they almost always ask for and obtain parental consent.

A few educational psychologists noted that information sharing was no longer a problem for them because they had ways to extract information from social work staff. For example, one respondent explained that whenever he felt that something important was happening in a child's family he communicated his worry to the social work staff and if something important had happened in the child's family, such as parents getting divorced or if somebody was ill, they would inform him about this.

Communication and relationship issues

Communication with the other department staff

None of the respondents in the three case-study authorities reported communication problems with staff in the other department. However, social work staff often stated that they did not understand some of the jargon that educational psychologists used in their tests and scales but this was not a problem because educational psychologists were always willing to explain these terms to them. Several educational psychologists were

aware of this problem but, as the following quotation highlights, they tended to find it hard to avoid using jargon in their assessment reports :

'I think that I understand their jargon whereas I would not say that I understand medical terminology and I do need the dictionary for that. I do not think that I have recently had to ask what they meant by that and certainly when I am talking to people I do not talk in jargon. My reports may well be, I try, but inevitably the jargon creeps in. Again, with descriptive reports it is easy but when you use the proforma because you think in categories the jargon creeps in a bit more regularly'

Educational psychologist (Authority A).

'There are not a lot of cases in the Social Work Department, there are a couple of social workers that I worked with recently I would think that is easier for education staff to follow social work jargon but more difficult for social workers [to follow ours]... but we try to explain them or they may ask us'

Educational psychologist (Authority B).

Relationship with the other department staff : examples of good and bad collaborative experience

The relationships between educational psychologists and social work staff in assessing children's special educational needs were explored through the question : '*Can you describe to me your relationship with the other department staff ?*' (see for probes in the appendix 2.5.).

Although many education and social work respondents in the three case-study authorities had some complaints about their relationship with staff of the other department and described incidents of limited and poor collaboration and conflicts between them, the majority reported that they had an open, friendly and satisfactory relationship with staff in the other department. The responses of education, social work staff and parents are presented separately.

Social work responses

The following quotation from a manager in day-care services in authority A is typical :

'In terms of being equal and friendly, there is no difficulty in that respect. I think in terms of higher management, in terms of my contact with managers in the Education Department. [It] is o.k. because I work here for years, since 1991. I know a lot of people ... There are, and are always going to be, difficulties in managerial level agreement in terms of provision, who does what, who pays for what but there is not any difficulty in the actual communication ... Whatever dealings we have do not lead to breakdowns in professional relationships We can not afford to have breakdowns in communication for the benefit of any particular child and in general. Inevitably, there are particular people where you do not agree with their methods, ethos or personality but that cannot be allowed to disadvantage the child'

Manager in the social work department (Authority A).

One manager from the previous under 5 social work services in authority B gave an example of an open relationship with educational psychologists :

'We are very open. When we have disagreements in the assessment they are very open to hear what we have to say. In fact, I recently had a conversation with the educational psychologist and she said to me that she is really impressed with the quality of work that we are doing here and that she values my assessment reports. This comment was really nice and I was very happy to hear this' **Manager in day-care services (Authority B).**

One member of Children Affected by Disabilities team in authority C described her relationship with education staff as healthy and considerably better than she had when she worked in another authority in the past and she attributed this to the fact that it was always easier to build good and close relationships with other professionals when you worked in a small authority.

One social worker in authority A made a distinction between having a friendly and open relationship and 'getting what you want' because, as she explained, the educational psychologists may be open and friendly but, in her own words, 'they are pretty tough people to negotiate with'.

Education responses

Although the majority of educational psychologists stated that their relationships with social work staff (both day-care staff and social workers) were open and friendly, a few

professionals were anxious to explain that this did not mean that their relationship was not professional. The following quotation illustrates these concerns :

'It is a typical, strictly professional relationship because we do not see each other except at the multi-disciplinary team meetings. You know them but do not socialise with them. Even with colleagues in our department we do not socialise because there is no time, let alone with colleagues in another agency' **Manager in the education department (Authority A).**

As with social work staff, a few educational respondents mentioned that their collaborative relationship with the social work staff was not always open, friendly, useful and/or pleasant because it depended on the personality and style of the individual worker. Many educational psychologists likewise stated that when they had some disagreements with social work staff, these were dealt professionally.

One educational psychologist in authority B referred to two factors that promoted the development of good relationships with the other department :

First, '*working with the same persons every time*' because, as she explained, when you know the people that you work with things are easier, because you are aware of their style of working and how to approach them. Second, '*having a lot of experience in inter-professional and inter-agency collaboration*' also helped because when you use a multi-disciplinary approach you know how to overcome communication problems and to be open-minded. The respondent also explained that her BA degree helped her a lot in developing good working relationships because, during her placement period she had

spent a great deal of time working alongside social workers and she had taken joint courses with them.

Parents' responses

The majority of the parents in the three case-study authorities mentioned that, overall, educational psychologists and social work staff (both day-care staff and social workers) seemed to get on well and be friendly to each other. A few parents reported that they have witnessed differences in opinion during the multi-disciplinary team meeting but, as they explained, these were dealt with 'in a professional way' :

'I think that they have a good relationship. It is common for professionals to get on well but even when they do not they never raise their voices to each other or exchange bad words. Instead, they stay calm and try to explain their point of view. Sometimes they agree to discuss these issues another time so it is difficult to know what happens when they are alone' **Parent (Authority C)**.

In the remainder of this section typical examples of good and bad collaboration between educational psychologists and social work staff in the three case-study authorities will be presented.

Examples of good collaboration

A manager of the under 5 social work services in authority A reflected upon a case of a family with a physically disabled child who had moved to the authority in the middle of

the second term. The manager explained that the educational psychologist and herself worked very closely together in order to ensure a placement for this child. In her words: 'we managed to overcome difficulties and the normal procedure about waiting lists because we both understood this was an emergency case'.

A social worker in authority B mentioned one case where a mother made a referral to both education and social work department because she was concerned about the development of her child :

'It turned out to be that the child did not live up to the expectations of his mother and when I went home I noticed that she did not leave the child alone to play. She cried out all the time to the child to put his toys back into the box and insisted that he played with only one toy at a time and the child did not seem to be happy about this. So, we decided with the educational psychologist to help the mother with her parenting skills in terms of the child's play and we assured her that it is very normal for a child to want to move from one game to another or to play in a safe and quite environment where he/she feels free to explore the world and to experiment with things. Now the mother and the child seem more happy and we are very proud of the work that we have done together'.

A member of Children Affected by Disabilities team in authority C recalled a case where she had worked very effectively with an educational psychologist in the case of a two year old boy with severe disabilities:

‘His mother became ... extremely ill. He was admitted to [name of the hospital] while his mother was admitted to hospital in [name of another authority]. There was a meeting which involved education staff, social work staff, health board staff and a residential respite unit in [name of another authority] with the father present. We talked in great detail about the child’s needs, abilities, current level of service everything that it was happening that time ... He was placed in a residential unit for the duration of his mother’s hospitalisation Although he is not in an age that he needs school or nursery, he is at an age that he can be in a toddler groups or playgroup and this respite resource did not have this kind of group attached but I undertook to link him to a playgroup nearby Now, if we had not had this good co-operation, collaboration, from the very beginning, this could have caused problems in the residential unit and probably he would have lost out the benefits he gets from seeing the other kids, so it has worked exceptionally well’.

Examples of poor collaboration

As stated earlier, the respondents recalled examples of both good and bad collaborative experience. Some typical examples of bad collaborative experiences in the three case-study authorities are given below.

Half of the educational psychologists reported examples of insufficient information sharing, where social work staff withheld important information (see sub-section ‘satisfaction with information sharing’). A quarter of the educational psychologists

referred to incidents of blurred roles and misrepresentation by social work staff : The first example is from authority A and the second from authority B :

'Recently a social worker suggested to the parents and to the other professionals that a pre-school child with special educational needs should go to a residential school and not to a mainstream nursery, without consulting me and I felt angry because it is my duty to decide about educational provision for the children. For this reason I sent a letter of complaint to chair of this area team and to the individual social worker but the decision had already been taken and it was too late'

Education officer (Authority A).

'A social worker represented me in a meeting and she misinterpreted my assessment and my opinion about the plans for the child and I wrote a letter to her and to her manager explaining my disappointment and I am planning to write a letter to the chair of the meeting explaining my position'

Educational psychologist (Authority B).

Many social work respondents (both day-care staff and social workers) complained that they often could not get hold of the educational psychologists and that they were not good at returning calls. In addition, many social work participants complained about the lack of feedback from educational psychologists about the outcome of an assessment and/or the progress of the child. The implications of this problem are highlighted in the following example offered by a social worker in authority C :

‘Sometimes I request a report and I do not know what happened after [that] The family may know the outcome and they come and say “We are getting a place in such and such school” and I think I would have liked to be told about that This statement really makes me angry because if I say "yes I did know" to the parents I would lie to them but if I say "no" to them they would probably be very disappointed about not working closely together, so what I usually do is to avoid answering this question and focus on what they are saying about the new placement'.

More than half of social workers made a reference to examples of late involvement and its implications for children and their families. The following example is typical of this situation :

‘The educational psychologist made it quite clear that they cannot meet the child’s needs in a local [educational] provision and the parents were very clear that they wanted to be provided in a local [educational] provision What we actually got is a school in [name of another authority] and he [the child] has to travel for hours on a daily basis two hours each journey ... We have got to support the parents. You think “Come on, this is not right, it is not acceptable for a four year old child to travel” It is a very difficult case and there has been two appeals and has been discussed at great length and education have tried very hard to find somewhere else to meet the child’s needs but up-to-date they have not If that had come up as an issue now, at the very early stages, I would hope that it would have been handled differently, because social work were only brought in to that at very late

stage. In fact, it was at the stage that the mother had already done two appeals to education and the appeals were turned down in both occasions and she came to us at the point she was talking about Ombudsmen and Court and reach such a peak I think that there was a complete failure in collaboration about that particular child' **Manager in the social work department (Authority C).**

Power issues in the relationship between education and social work staff

As far as power issues in the relationship with the other department staff is concerned almost half of the education and social work department participants echoed the following view :

'I think it is quite equal because each one of us has a role to fill in and complete and each and every one of us does not have the same role. You know, it is slightly different the kind of format it takes. I certainly feel, from the meetings I have with other professionals that I meet regularly , that we all appreciate each other's roles, and I also appreciate that other roles are as just as important, in order to get child's whole, complete input. I do not think that there is really the kind of attitude that one is more important and can say "you do this, you do that". Everything is very equal in that sense' **Day-carer (Authority A).**

On the other hand, most of the respondents agreed that whoever controlled the resources was more powerful and had the last say and they could think of several examples that

illustrated this situation. Many professionals did not restrict themselves in the citing of examples of where the other department staff was more powerful but they were also very willing to refer to examples where they were themselves more powerful and had the last say.

At this point it is helpful to consider the following quotation which indicates the circumstances in which social workers and educational psychologists took the leading role:

'That's a difficult concept, equal or unequal. I think that different people take a lead at different times for different reasons. A social worker would have to take the lead when there is a case of child protection. I can give you an example. A case which is going to the Children's Hearing and the child may need to be removed from his mum. I may think "Oh gosh, this is awful because this is a child with special needs and they are going to place it in a special school far away and this is not going to be good from developmental point of view or an education point of view".... I wrote all of this in my report and discussed it with the social worker and because this is a child protection issue, the mother no longer fulfils this child's needs and the Children's Hearing has to make a decision based on protecting the child and education has to come second to that. In that case social work is the lead agency because they are charged for protecting the child and education slots behind that ...' **Educational psychologist (Authority A).**

An educational psychologist in authority B gave a detailed description of how the system works and of the underlying thinking from an educational psychologist's point of view :

'It is difficult again to have disagreements anyway with the way that is organised. I am there to do an assessment and in the end I make a recommendation and they can make their own recommendation which may be different from mine and might well have not an argument but a discussion about it. I cannot think that I have ever had any disagreement but in theory they may say "I really feel that a child should be in special education" and I may feel that a child should go to a mainstream school. If that is what happens they have to give their professional recommendation and I have to give mine and I have to back it up and so do they and I do not have problem with that. Because this has not happened I do not know if they would have problem with that. I doubt it, they would not, they may think that I am stubborn but I am entitled to my professional opinion and, at the end of the day, you have to protect your professional integrity ... '.

The following quotation is an example of another situation where social work staff can be powerful and have the last say :

'The truth is that whoever has the resources is more powerful and has the last say and the same exists for us. For example, we recently had a child who came back to us from the nursery and the educational psychologist thought that they can bring back the child without any problem but it does not work like that because

we have a waiting list and criteria for admission. We tried to respond as quickly as possible but they have to understand our situation too, and in this case we had the final say. In general, however we try to explain our procedures and criteria to them and they try to explain theirs to us, which really makes things easier and minimises any power issues. It is always easier for the collaborative relationship when the other person knows and understands the way that you are working. People learn from practice' **Manager in the day-care services (Authority A).**

As is shown in the following two quotations, day-care staff appear to accept the fact that educational psychologists have the last say in decision-making about school placement for children with special educational needs, regardless of possible differences in opinion (this issue does not apply to authority C because, as shown in chapter 5, it did not have available special educational provision placements).

The first quotation is from a manager in one day-care placement in authority A whereas the second is from a manager in one day-care placement in authority B.

'Sometimes it can be a difference in opinion, what resource may be the best resource for the child At the end of the day, it really comes down to the knowledge of the educational psychologist and the wishes of the family ... but sometimes you feel "Oh, I am not sure if they are actually moving into the right resource" I do not really feel there are disagreements as such that would cause confrontation or tension. It is more of a difference of opinion and I think that people are more accepting

of differences in opinion Sometimes this difference in opinion, actually gets sorted out by the child itself ... When it gets nearer to moving on [to another placement], for example, you get signs that “No, this is a more appropriate resource”. The difference in opinion kind of disappears because the child has made progress ... because at the time that you are applying for a special educational resource you usually have a few more months before the child moves on to that resource so, you are projecting what prognosis it is going to be I think, ultimately, it is the educational psychologist the one that makes the decision, together with the parents We have to place the trust in them because time will show whether this is the right resource anyway, sometimes you have to try to know’ **Manager in the day-care services (AuthorityA).**

‘Recently there was a review about a child and there was a discussion about the school placement that could be provided for this child. The key worker and myself felt that the child's learning needs would be met in the mainstream school but his emotional needs would not and for this reason I did not agree with the educational psychologist's decision to send this child to the mainstream school. I explained in detail why I believed that this was not the right decision but she stuck with her decision and we did not raise further objections because she is responsible for educational provision’ **Manager in day-care services (Authority B).**

Scarcity of resources and its implications in the relationship between education and social work staff

Although the majority of respondents reported that there was a scarcity of resources problem in their authority, some differences in opinion between education and social work staff were identified with regard to the extent of openness of this situation.

Acknowledgement of resource limitations by educational psychologists and social work staff

Although the majority of the educational psychologists in authorities A and B appeared to be satisfied with the openness of the social work staff as to the resource problem in their department, social work staff did not feel the same about educational psychologists (this issue does not apply to authority C because, as shown in chapter 5, day-care social work services offered placements of only a few hours a week to pre-five children). Typical social work responses included :

'Probably the biggest disagreements that we have are about resources, everything comes to money in the end. The resources are very thin on the ground in our authority and everybody is competing for the same money and sometimes we think that a child should be offered more but they say that they can not do it. They do not usually admit that the reason that they do not want to offer some services is money. They usually find some excuses or say that they think that the child does not need these extra

resources or they may say «we have several restrictions»'

Manager in the social work department (Authority A).

In similar vein a social worker in authority B reported :

'Many children do not get the right services because of the limited resources available so sometimes I feel that children start off with the second-best services'.

However, many educational psychologists appeared to think differently. They claimed that they always tried to be honest and open with social work staff when they could not afford some educational resources and that they tried to explain to them that they did not like acting as gatekeepers and that the problem of limited resources was a political issue.

One manager of the social work department in authority A offered the following explanation for disagreements between the two departments' staff :

The difficulty lies in the fact that we do not have enough understanding of each other's resources and for this reason we often have great expectations and demands and we are disappointed when these do not become true. It is difficult to know about all the available resources in your department let alone the resources in another department and so you do not know the problems and the reality behind the scenes. These days we are all budget conscious. The scarcity of resources is a great burden and affects departmental relationships. The money issue stops things. For example, we may have good ideas but we may have

great difficulties in implementing them. The commitment is there but not the money and this frustrates all of us'.

Scarcity of resources and its implications for the relationship between education and social work staff

Although the scarcity of resources was almost unanimously seen as an obstacle to inter-professional and inter-agency collaboration by education and social work respondents, there were some differences in opinion between professionals as to whether this problem was the main reason for disagreements between them. There were differences in opinion not only between education and social work staff but also between professionals in the same occupation.

Almost three quarters of the respondents (both education and social work staff) argued that scarcity of resources was the root of the conflict between them and if they could solve this problem, they would have had an excellent relationship with staff in the other department. On the other hand, more than a quarter of interviewees claimed that scarcity of resources was just the tip of the iceberg and there was no chance of ever having an excellent relationship with staff in the other department. Some respondents were rather cynical about the relationship between education and social work staff. The following two quotations are typical :

‘No, we would find something else to disagree about ...

Whenever you achieve something ... there is always something

else to deal with, it is really difficult not to have some kind of gate-keeping of resources ...' **Manager in the social work department (Authority C).**

A few social workers argued that if both departments had all the necessary resources, the educational psychologists would be even more reluctant to collaborate with them because they would not feel the need to work with them anymore.

Summary of the first section

The study revealed that there were several benefits from inter-professional and inter-agency collaboration for education and social work departments (professional benefits), the staff involved (personal benefits) and for children and their families (altruistic benefits). Although drawbacks for the respective departments and the parents were identified, the advantages of such collaborative activities appeared to outweigh the disadvantages. As far as the aims, focus, and perspectives of the two departments are concerned, although some educational psychologists and social work respondents believed that they were similar, evidence suggested that this was not always the case.

It is clear that educational psychologists played the leading role in the assessment and recording process and that they usually made the decisions about the educational provision. With regard to each others' roles, educational psychologists seemed to be familiar with both the role of the day-care staff and that of social workers. However, social work practitioners were often unclear about their own role in the assessment of children's special educational needs, as well as about the role of the educational

psychologists. Differences in opinion as to the usefulness of overlaps in the roles of these groups of professionals emerged: some professionals thought that it led to holistic assessment and better provision of services whereas others viewed it as a waste of resources because it resulted in duplication of work. The majority of parents were happy with the contribution of social work staff but not with that of educational psychologists.

Concerning the frequency and duration of collaboration between educational psychologists and social work staff, the collaboration between educational psychologists and day-care staff was both more frequent and long-lasting than that between the educational psychologists and social workers. Even when educational psychologists were aware of a social worker's involvement, they did not always collaborate because pressure of work had forced them to do so only in specific cases. Although the Children (Scotland) Act 1995 had not been fully implemented, some changes in the frequency of collaboration were identified but these were not necessarily directly related to the legislation. Education and social work staff in authorities A and C felt that there was a need for greater contact but this was perceived as unfeasible, due mainly to pressure of work.

A number of factors affecting information sharing emerged and it was clear that confidentiality sometimes led to educational psychologists' dissatisfaction with the information shared. Incidents of poor collaboration and conflicts between educational psychologists and social work staff were mentioned but, overall, both groups of professionals seemed to be content with their existing collaborative relationships. Education and social work staff were more powerful in different situations (social

workers in child protection cases, educational psychologists in decisions about school placement).

Regarding the scarcity of resources, social work staff were more open about the limited resources in their department and made fewer attempts to lay claim on resources available in the education department. Lastly, differences in opinion between education and social work staff as to whether the scarcity of resources was the main inhibiting factor in their collaborative relationship were identified.

SECTION B: INTER-ORGANISATIONAL ANALYSIS

Interpretation of the data using social exchange, resource dependency and political economy models

The inter-professional and inter-agency collaboration between educational psychologists and social work staff is examined in this sub-section from an integrated theoretical perspective. The five central aspects of the social exchange, power/resource dependency and political economy models will be considered: exchange, interdependency, political forces, power and conflict. It will be shown how the motivation of inter-agency collaboration between education and social work authorities is simultaneously internal and voluntary (social exchange model) and external and involuntary - in terms of being imposed by a third party - (political economy model). It will be argued that it is difficult to assess the extent of interdependence (unilateral interdependence and reciprocal interdependence) in exchange relationships and, thus, whether there is symmetry and/or

equality in these interactions. Lastly, it will be demonstrated how these two welfare agencies are engaging in some exchange and some power/resource dependency interactions (see also chapter 2, section 'theorising inter-agency collaboration : An integrated approach).

As explained in chapter 1, several policies have recommended closer collaboration between Scottish education, social work and health departments in the assessments of children with special needs (Education (Scotland) Act 1981; The Scottish Office, 1996a-d; 1997c; 1998b; 1999a). However, only recently has the need for '**closer collaboration**' between education, social work and health departments in this field has been required (Children (Scotland) Act 1995).

The reason for highlighting the words 'closer collaboration' is to emphasise the fact that the above policies emerged from situations where collaborative activities already existed. Of course, if efficient interactions were already taking place there would not have been a need for policy-makers to develop a number of policy documents in order to regularise such exchanges (the limited and poor collaboration between education and social work departments was also confirmed in the research studies reviewed in chapter 2).

Two inter-related questions arise from the discussion so far. First, why voluntary collaborative activities between education and social work authorities already existed and, secondly, why these welfare organisations did not collaborate closely? A consideration of the main principles of the social exchange and power/resource dependency perspectives can assist in the answering of these questions (the latter

question will also be explored in chapter 9, where a thorough analysis of the factors that influence inter-professional and inter-agency collaboration is undertaken).

Organisations are engaging in voluntary collaborative activities when they perceive mutual benefits or gains from interacting and, therefore, when there is interdependency (see chapter 2, section 'theorising inter-agency collaboration : An integrated approach').

As shown in sub-section 'advantages of working together', three different types of mutual benefits or gains were identified in this study: benefits for the department such as joint assessment of the children's needs which has cost-effectiveness implications; benefits for children and their families such as holistic assessment and best provision of services; and personal benefits such as job satisfaction and colleague support. The majority of the education and social work respondents also reported that the advantages of such collaborative activities outweighed its disadvantages.

However, this does not mean that there was a symmetry or equality in the exchange. Hvinden (1991) claims that the interactions between a given pair of organisations are likely to have several dimensions. For instance, two organisations may have a reciprocal relationship concerning the exchange of information, but a non-reciprocal one when it comes to the exchange of material resources. As is demonstrated in the following paragraph, the social work staff (both day-care staff and social workers) had more power in the main resource exchanged (information-sharing) but educational psychologists were more powerful in the decision-making for the school placement for children with special educational needs.

It was clear from the presentation of the data above (section 'information sharing issues') that the major resource exchanged was that of information and it was shown that a situation of inequality did exist in terms of richness of this resource. The balance of power, with regard to information sharing, was found to lie with the social work staff for two reasons. First, educational psychologists were in the position of having less valuable information insofar as theirs was not perceived as confidential and, second, because the social work staff were able to make decisions as to the needs of educational psychologists regarding information. However, the educational psychologists were acknowledged to be more powerful than social work staff concerning both the decision-making and allocation of resources for school age children because they were the ones who controlled the resources that would be provided for this age group (see sub-section 'the role of the educational psychologists in the assessment of special educational needs').

Hvinden (1994) argues that the symmetry and/or equality in exchange relationships can be further assessed by examining the following two areas : first, how often each organisation initiates contact in order to exchange resources and, second, by examining the satisfaction of the members of each organisation with the collaborative relationship. One would expect that reciprocal interdependence occurs when the two parties initiate contact approximately at the same extent and when both parties are satisfied at the same degree with the quality of their relationship.

As educational psychologists were responsible for co-ordinating assessments of special educational needs and for the opening of record of needs and, therefore for deciding whether they would collaborate with social work staff, one would assume that the

relationship between educational psychologists and social work staff was characterised by unilateral interdependence since the contact in most cases was, most likely, initiated by educational psychologists. However, as it was shown in sub-section 'awareness of social workers' involvement and criteria for collaboration', the most common case was that social work staff contacted the educational psychologists in order to inform them about their involvement and make referral for formal assessments. Nevertheless, the fact remains that educational psychologists were more powerful than social work staff in the sense that the former group were under no obligation to collaborate with social work staff.

The implementation of the Children (Scotland) Act 1995 is expected to change this situation because according to the section 22 of the Act local authorities are required to safeguard and promote the welfare of children in need in their area as well as to promote the upbringing of such children and their families by promoting a range of services appropriate to children's needs, is expected to redress the balance of power and increase inter-dependence and intensity (see section B of chapter 1). Thus, in practical terms, whenever the social work staff wish to exchange information with educational psychologists for children with special needs they have to comply with this request and vice versa. However, having to comply with this kind of request does not mean that social work staff would stop being anxious about confidentiality issues, because this would not have been compatible with their statutory duties and obligations. It is very likely, therefore, that there will continue to exist some inequality in the richness of the resource exchanged between these two parties.

As far as the relationship between educational psychologists and social work staff is concerned, neither of them appeared to be more dissatisfied with the quality of their relationship. This does not mean though that there were no disagreements and/or conflicts. The inequality in the information exchanged inevitably resulted, on some occasions, in disagreements and more seldom in conflicts between these two groups of professionals. Another common reason for disagreements and/or conflicts was the pursuit of the material resources of the other department. Although the power was more balanced when it came to resources provided for children under five, since both departments offered services for this age group, the scarcity of resources sometimes led staff in both departments to the 'making up' of arguments in order to convince staff in the other organisation that some particular children's needs would be best met in their own placements (the latter issue is further discussed in chapter 8). Thus, the claim of the resource dependency perspective, that agencies are in short supply of resources and their survival is depending on the acquisition of scarce resources at the expense of other organisations, is relevant to a degree in this study (this aspect of the resource dependency model is not applied to authority C because they do not offer services to pre-school children and it is not applicable any more to authority B because recently all the under 5 services were transferred to the education department).

According to Benson (1975), as the main concern of professionals involved in inter-professional and inter-agency collaboration is the pursuit of resources, they are all guided by a number of 'action orientations' which inhibit such collaboration. It is pertinent here to review these action orientations because, as will be demonstrated in the following

paragraph, both education and social work used these actions in their daily practice.

Professionals : try to retain the way that their profession operates; attempt to maintain a predictable supply of resources; and defend the way that their organisation views and assesses situations.

Several educational psychologists and social work staff respondents, and particularly educational psychologists, reported that they were frightened by the criticisms and pressure that staff from the other department put on them in relation to their mode of working and the perspectives that they hold and expressed their wish to retain the way that their profession operated. In addition, there were several occasions when both groups of professionals tried to defend the way that their department viewed and assessed situations. For example, many educational psychologists referred to the practice of the social work staff in working closely with the parents of children with special educational needs and explained to me that this was not necessary for them in all cases and, even when it was this was not always feasible due to their pressure of work. A quarter of the educational psychologists also acknowledged their fear of working closely with the parents because of the possibility that they would make more demands and require extra resources. Several educational psychologists seemed, therefore, to keep some distance from the parents of children with special educational needs in order to maintain a predictable supply of resources.

Moreover, according to several social work staff respondents, educational psychologists sometimes tried to find excuses for not offering some services to children with special educational needs, especially in cases where the child already had a placement in their

department. On some occasions, while an interview with educational psychologists was conducted, they expressed their frustration at being gatekeepers of the limited resources in their departments and having to comply with the restricted criteria for allocating available school placements to children with special educational needs .

One emerging issue is, therefore, what happens in the absence of and/or minimal collaboration and, more specifically, how do the educational psychologists and social work staff, and particularly the former group, handle the problem of not being able to acquire the resources needed ?.

Hvinden (1994) in his comparative study of inter-agency relations in Norway and Scotland identified three kinds of adjustments to problems of dependence: force, avoidance and substitution. As it is shown below, educational psychologists used the last two types of adjustments and especially the last one, that of substitution.

Staff may *force* the organisation that acquires the resource needed by trying to build alliances with other agencies in order to influence the agency controlling the needed resources. *Avoidance* is a second option and this can be achieved by several ways. For instance, the staff may try to do without the resource or may give less emphasis to tasks and goals mediated by the resources controlled by other agencies. *Substitution* refers to staff's attempts to obtain the resource needed from other channels or find an alternative resource serving more or less the same function. In Hvinden's study staff adopted this reaction when they felt '... over stressed and/or perceived themselves to be in disagreement with representatives of the other agency on operational philosophy...' (1994:207).

As the main resource exchanged was the information sharing, the following discussion is concentrated on this type of resource. As was shown in sub-section 'awareness of social workers' involvement and criteria for collaboration' although there were not written guidelines concerning criteria for collaborating with social work staff, educational psychologists have constructed their own and they tended to collaborate with social work staff only when this was absolutely necessary and in this way they tried to do without the resource (avoidance). In addition, several educational psychologists preferred to adopt an independent approach by trying to get themselves the information that they needed. Thus, instead of having to depend on social work staff to provide them with information about the child and his/her family they worked closely with the parents and in this way they got direct information (substitution). Of course, as a few educational psychologists explained this strategy had also its own disadvantages because it was time-consuming and it was not always effective as sometimes the parents were not as open to them as they were to social work staff.

Summary of the second section Inter-agency collaboration between education and social work staff, in assessing children's special educational needs reflected characteristics of each of the three models examined in chapter 2, social exchange (in terms of collaboration being until recently, internal and voluntary, and resulting in mutual benefits and, thus, interdependence), resource dependency (in terms of pursuing the resources of the other department and using various ways against collaboration) and political economy (in terms of being imposed by legislation and, thus, external and involuntary). The

symmetry or equality of the exchange relationships was difficult to assess due to its numerous dimensions. The study revealed that social work staff had more power over the richness of the information they could share, whereas educational psychologists were more powerful both in deciding on school placements for children with special educational needs and whether or not to collaborate. Lastly, and most importantly, it was shown that collaboration between education and social work staff was limited in extent and poor in quality, and that minimal collaboration was achieved through the employment of two kinds of adjustments, avoidance and substitution.

Before moving on to the exploration of the factors that influence inter-professional and inter-agency collaboration, the next chapter addresses the central issues in the assessment process.

CHAPTER 8

CHAPTER 8

CENTRAL ISSUES IN THE ASSESSMENT PROCESS

Introduction

This chapter concentrates on key themes regarding assessment and its outcomes which emerge from the study. It begins with a presentation of findings concerning parental satisfaction with the process of assessing special educational needs and with the school placements offered to their children and continues with a discussion of the functions of the assessment process. It is argued that the assessment has several additional functions from those stated in policy documents, and its benefits are not restricted to the children in question but also extend to professionals, the education system and ultimately to society as a whole. It is also argued that decision-making is a complex social process, and that, as with the assessment process, several other factors which are not related to the children's needs and circumstances influence the thinking and actions of the decision-makers.

Parental satisfaction with the process and the outcomes of assessment

Educational psychologists' assessment reports were a particular source of annoyance to the majority of the parents. According to most parents the assessment reports were 'incomprehensible' as they could not understand many things that were written in them, particularly the test results. However, as noted in the previous chapter, the educational psychologists felt that they did not have any choice about this because the assessment

reports were not written solely for parents but also for managerial staff in the education department in order to assist them in the decision-making about educational provision. On the other hand, as Armstrong (1995) rightly argues, it might not be unreasonable to suggest that the technical nature of these reports '...could also serve the function of legitimating the central role of the psychologist in the assessment procedures on the grounds of the psychologist's technical knowledge and skills' (1995:41).

A few parents mentioned that they had never received a copy of the educational psychologists' assessment report and that they were not certain about the outcomes of the assessment process.

None of the parents mentioned that they were actively involved in preparing the assessment report but this might have to do with the fact that this issue was not directly examined in this study and, thus, parents were not asked about partnership issues. However, as stated earlier, many parents felt that they were ill-informed and some of them did not appear to be aware of the outcomes of the assessment process which indicates that the situation is still far from one of partnership between professionals and parents (see sub-section 'parental satisfaction with the contribution of the educational psychologists and social work staff').

More than half of the parents, in authorities A and B who were informed of the outcomes of the assessment, stated that they were satisfied with the decision about the placement for their child, but several added that they were not happy with the extra support that their children were receiving. For instance, Rebecca's and Jessica's mother wanted the mainstream school to get extra auxilliary staff in order to be able to put her twin

daughters in two different classrooms for the reasons that will be further explained in the next section of this chapter.

The parents interviewed in authority C were neither satisfied nor dissatisfied about the placement offered to their child. As one parent explained, although she and most of the other parents in the authority did not expect to have a variety of schools to choose from (mainstream and special schools provided by public and private sector) because their authority was small and dispersed, still they were disappointed that there was no special educational provision in the authority and, that the only alternative to mainstream education, was to send their children to schools outwith the authority.

Functions of the assessment process : Who benefits ?

Over the past fifteen years the belief that assessing and labelling a significant number of children as having special educational needs is a purely objective, scientific and humanitarian process has received much criticism within the UK as well as in the USA and Australia. As is shown in this sub-section, there is now a much greater awareness that there is a critical distinction between the explicitly stated functions of assessments and their actual functions, and that assessments do not necessarily benefit the children but, instead, professionals, the whole education system and the wider society.

However, before examining the shortcomings of the assessments and records of needs it is necessary to clarify two issues. First, to make a distinction between formal and informal assessment and, second, to make a distinction between '*needs led*' and '*resource led*' assessment.

Whenever day-care staff in authorities A and B had a concern about a child that attended their services they contacted the educational psychologist to come and assess the child informally. This means that the day-care staff did not usually make a proper referral to the educational psychologist and/or inform the parents about the forthcoming visit of the educational psychologist, until the educational psychologist decided whether he/she would initiate a formal assessment. The common practice for educational psychologists was to keep a record of these children until they were 4 years old and only then to initiate a formal assessment. The reason for doing so was that educational psychologists were often overloaded, and their priority was children with special needs who were to go to school and for whom a formal assessment was necessary for the decision-making as to the school placement.

The educational psychologists were asked how different their practice would have been if they were not short-staffed and thus, if they were allocated fewer cases. Many educational psychologists replied that, first, they would initiate the formal assessment at an earlier stage because in this way they would be able to do preventive work, which they seldom did in the existing situation. Second, they would work more closely with parents, because although their role included this task they seldom had sufficient time to do it. Third, they would open records of needs at an earlier stage instead of leaving it for when the children moved to school placement. With regard to the last point, several educational psychologists mentioned that opening a record of needs was a complicated and time-consuming process because once they opened it, they had to have review panels annually

and since the children's needs changed continuously they would have to spend a considerable amount of time redrafting it.

According to the legislation the assessment process has two main functions. The first function of formal assessment is to get as broad a picture as possible concerning the needs of the child being assessed as well as concerning what special help should be provided. The second function of the formal assessment is for officials in the education authority to decide whether to draw up a record of needs specifying what the child's needs are and what special help should be provided. (Education (Scotland) Act 1981; The Scottish Office, 1996a).

However, the situation is not as simple as it sounds because the resources are not the same in all authorities and the limited resources can result in a 'resource led' assessment rather than a 'needs led assessment'. This, in practical terms, means that the educational psychologist's main concern at the beginning of the assessment process should be to produce an accurate, holistic assessment of the children's needs and not to consider whether resources are available in the authority to meet those needs. Only after reaching a decision about the nature of the children's needs should the educational psychologists consider the question of resources. This involves, first, considering all the available forms of educational provision and, second, deciding with parents about the most appropriate placement.

Many educational psychologists in the three case-study authorities argued that this was actually a pointless exercise because as one educational psychologist in authority A put it, 'what's the point of deciding first what resource would best meet the child's needs when

this resource may not be available in the authority ? ... this would only anger and disappoint parents'. Thus, as Goacher et al, (1988) argue the functions of formal assessment are not related just to the *allocation of resources to children* but also to the *allocation of children to resources*. In their words, 'special schools and units are resources which are already there, regardless of whether they are allocated to a particular child, so they are extra resources, allocated in advance of the needs of any individual child' (ibid:99).

A number of criticisms have been made of the nature and purposes of formal assessments and records of needs. Some authors, including Galloway et al (1994), are sceptical about assessments and record of needs as they view them as a political activity which preserves the social order in society. They argue that putting a special label and offering different educational provision to some children (special classes/units attached to mainstream schools and special schools) on the basis of this label, benefits educators

'as they are able to concentrate on the meritocratic education of the able and the conforming, unimpeded by the undoubted problems that arise when difficult children remain in ordinary classrooms, and there is no necessity for the school system or organisation to change. The wider society also benefits from any certification or statementing which validates the removal of special treatment of these children, in that it has been given advance warning that particular individuals may pose problems for authority later in their lives' (ibid:105).

Though it can not be denied that assessment is partly a political process, it is important to make a distinction between the assessment itself and the uses to which the results of assessment are put. As Satterley (1981) rightly points out 'one may distinguish those who use it to classify pupils on behalf of others from those who use it to help pupils learn' (ibid:22). A few respondents in authorities A and B mentioned that they were aware of colleagues who had formed ideas as to the school placement that should be offered to children with particular types of special educational needs. For instance, if a child had cerebral palsy their colleagues recommended a special school not only because of their concerns of the added stress for the teachers but also because of their worries regarding the quality of education that these children would receive.

A second criticism to assessment is that it favours middle class pupils and is disadvantageous for other groups. The process of assessment is often criticised for being oriented toward the middle class, for what educational psychologists and teachers assess is the attainment of 'middle class concepts' using 'middle class language', assuming that all children are exposed to 'middle class experiences'. As a result of this kind of bias, teachers and educational psychologists frequently underestimate the capabilities of working class and ethnic minority group children.

Several parents in the case-study authorities complained that educational psychologists did not use a simple language when they spoke to them and to their children. One parent in authority A reported that

'He [the educational psychologist] does not change the way he speaks to me from the way he speaks to his colleagues, and I am so fed up asking him for explanations'

whereas another in authority B stated that

'When [name of the educational psychologist] came to my house to assess Colin's needs, it did not come as a surprise to me that Colin did not do most of the things that he was asked to do because [name of the educational psychologist] always speaks professionally and only when I intervened and explained to Colin what to do he did it but the [name of the educational psychologist] was not happy about this' (Colin had moderate learning difficulties).

Of course, it is not clear in that case if Colin did not do what he was requested because he had not understood what the educational psychologist had said to him. He might not have wanted to co-operate but changed his mind because his mother asked him to do so (for summary of data on case study children see Appendix 2.5). The fact, though, is that some parents expressed their concerns and complaints about the language used by educational psychologists, which confirms that some educational psychologists did not always take account of the differences in the experiences of children from working class backgrounds. In addition, as was shown in chapter 5, most of the pre-five children with special educational needs in authorities A and B, attended day-care social work services and these services did not (until recently in authority B) follow the Scottish Office

guidelines with regard to the curriculum and, thus, one could argue that the children who attended these placements were not so well prepared as those children who attended nursery schools and classes.

The final, and perhaps the most significant criticism of assessments is that they can have a number of other functions apart from the purported aim of identifying the child's needs. Five such functions of the assessment process were identified in this study. These functions are examined below (Dyson, 1987; Galloway et al, 1994, Thomson et al, 1989).

Assessments can be a means for explaining or justifying the restriction of access to certain services

Almost a quarter of the educational psychologists reported that sometimes they reached a decision about the placement of a child before they undertook or completed an assessment of the child's needs. They explained that they did so mainly in two sets of circumstances. First, when they thought that the children's needs were obvious (e.g. for children with Downs Syndrome). Second, when children who were almost five years old were referred to them and a decision about their educational provision had to be reached in a very short period. In these circumstances they had to leave the formal assessment for later on.

Although it is undeniable that educational psychologists sometimes have to take immediate actions, it is equally beyond doubt that this can have serious immediate implications for the children and their families. First, how can the educational psychologists be certain that the needs of these children will be best met in these

placements without having firstly thoroughly assessed their needs? Secondly, how can the assessment process be objective in these cases? The latter question implies that when the educational psychologists carry out an assessment for children who have already been allocated to a particular placement, they might attempt to prove that the placement that they have chosen for these children was the right one and, thus, they might not be as objective as in the case where the assessment has preceded the decision about the placement.

Less than a quarter of educational psychologists claimed that it was difficult for them to inform parents about the scarcity of resources in their authority. They reported that they tried to convince them that some placements or services were more appropriate for their children, and used the assessment process as a means of proving that the needs of the children would be best met in particular placements. However, on many occasions, the social work staff acted as advocates and tried to convince the educational psychologists that it was important to have an open and honest relationship with the parents, pointing out that parents usually accepted the reality better than some professionals believed.

Assessments can be a means of 'proving' that the professionals have a more realistic view of the children's abilities, weaknesses and needs than their parents.

Although a number of policy documents emphasise that no-one knows the child better than his/her own parents, many professionals did not appear to accept or comply with this principle and they believed that since they were experts in the special educational needs field and had some distance from their cases they could have a more realistic and

objective view than the parents of these children (The Scottish Office, 1996a; 1997 a-c).

The following two examples demonstrate this situation.

An educational psychologist in authority A referred to Zane who, as explained earlier, was of Asian origin and had complex/multiple difficulties. His mother had rejected all the alternatives for educational provision and insisted on sending him to the local mainstream school on the grounds that there were no other Asian children in the special schools.

In authority B, an educational psychologist, referred to Imran, who was also of Asian origin, whose needs were similar to that of the child described above, and his mother did not seem to recognise his complex needs. When the educational psychologist informed Imran's mother about the alternative forms of educational provision, she expressed her disapproval of all of them on the grounds that her son could do much better. The educational psychologist was worried about the mother's reaction because, in her opinion, the mother seemed to have either little understanding or acceptance of the severity of her son's condition.

In both cases the educational psychologist decided to call a rather informal multi-disciplinary team meeting, with a limited number of professionals (a social worker, a paediatrician and herself) in order to discuss the results of the assessment and prognosis with the mother.

In a few cases, when the educational psychologists felt that parents views and/or plans were unrealistic they decided to take actions without consulting, negotiating with or even informing parents. This is illustrated by the following example :

'We did not want the girls to go to the mainstream [name of the school] but we feel that we had no alternatives [Parents' preference was] a school ... [name of the school in another authority] we had been to see. [Name of the educational psychologist] put a reference in, she thought that the girls would be there, then they changed councils We were left with one choice and it was [name of the local mainstream school] which if you ever see it is on four levels. It is like, you have to go upstairs to get into the school [classroom] ... We were told that we would get ramps ... which I would happily accept. ... It all fell through A person who has never met my children and who we have never met made the decision* that this is not going to happen ... And now we have not got the auxiliary ... If there were kids with special needs from two separate families they would not have been treated the same, they would have been seen as units. I wanted them in separate classes. Jessica is very, very above intelligence ... but Rebecca is very far behind. I feel that Rebecca could come one better without her sister there. It is like, if you say to Rebecca «what colour is that Rebecca ?» Jessica would go «It is red» so Rebecca is like «what's the point in me answering you ?» so I feel that Rebecca would not reach her high potential ... They did not listen to the physiotherapist, to the occupational therapist, social worker ... and somebody from the education [department], as I said, who has never met my children has made a decision about our children, it is their future, without even consulting us'. **Parent (Authority A)** (for summary of data on the case study children see Appendix 2.5.).

Assessments can be a means of monitoring the relationship between parents and children to see if parents are bringing up children in ways that professionals consider to be 'appropriate'

Less than a quarter of educational psychologists referred to cases where they felt that the parents were not bringing up their children in an appropriate way and used the assessment process as a way of working closely with them in order to help them improve their parenting skills.

A social worker in authority A noticed in her home visits that James' mother (James was a 4 year old child with possible mild learning difficulties) did not let him play with his toys, she continually interrupted him, and that afterwards both the child and the mother were upset. As the social worker was concerned about the mother's attitudes and did not want to make the mother feel that she was not doing her best for the child, she contacted the educational psychologist and asked him to initiate an assessment of the child's needs and to pay special attention to his interaction with his mother.

Two single mothers claimed that the professionals were watching them constantly, and tried to find excuses for visiting them at home in order to check their parenting skills.

Assessments can be a means of justifying the existence of certain services, institutions or professional roles and a means of demonstrating the competence of a particular professional

Several writers have pointed out the interdependency between professionals and their clients (Tomlinson, 1981; Goacher, 1988; Galloway et al, 1994). This suggests that

educational psychologists need to have clients with special educational needs in order to be able to carry out their duties, and children and their families need educational psychologists to assess their needs and provide services to meet their needs.

As far as the justification of professional roles is concerned, medical officers, educational psychologists and social workers are in a continuous competition as to who would gain overall power. Two examples of such situation are given below. The first example concerns competition between educational psychologists and paediatricians, whereas the second refers to competition between educational psychologists and social workers.

In one multi-disciplinary team meeting in authority A differences in opinion between the educational psychologist and the child health paediatrician became apparent as to the nature of difficulties that the child, who was going to be discussed in that meeting, had. The paediatrician claimed that John had moderate learning difficulties and autistic features whereas the educational psychologist claimed that there was nothing wrong with the child. He said : 'I think the problem is that he does not get enough stimulation in his family because his father is out working all the time, his mother has depression and their relatives are living in England'. Although the paediatrician seemed to acknowledge this situation she insisted that the child had special educational needs and that the parents should be informed about this. The discussion ended with a common agreement to carry out some further examinations and tests on John.

In the following example it is demonstrated that the relationship between educational psychologists and social work department staff sometimes has ramifications for children with special educational needs that go well beyond the specific involvement of the latter

in providing information and/or advice in the assessment of special educational needs. It is also shown that where educational psychologists anticipate that other agencies, in this case social work departments, will take certain actions, these may be seen as likely to pre-empt the need for further action by the education authorities and, thus, the educational psychologists may not be convinced that an educational assessment is appropriate.

An educational psychologist in authority B, worked together with a social worker for Deborah, who was almost five years old and had mild learning difficulties as well as behavioural difficulties. It is pertinent here to explain some things about her family. Deborah and her family were living in poverty and in an unhygienic environment. Both parents had moderate learning difficulties, and all the children in the family (five including Deborah) had behavioural difficulties and had quit school or been expelled. Day care had been arranged for Deborah and she was spending half of a day with her day carers at that period.

The social worker explained that he was using family therapy with Deborah's parents and siblings in order to improve the family members' behaviour. However, the educational psychologist was very disapproving of this approach and claimed that there was little chance that the family members would change their behaviour. Instead, he wanted him to take immediate action and place Deborah in a residential setting since the day carers could not adopt her even if they wished to. The social worker, however, did not favour this idea because he thought that this would be destructive for Deborah because her behaviour had improved since she started spending time with her day carers and he was

worried that she might perceive this as a punishment. Thus, the social worker was of the opinion that it was worth trying every possible method with the parents to try to convince them to give Deborah up for adoption.

The social worker noted that he was not convinced that the educational psychologist's disapproval derived from his belief that the family could not change but rather from his frustration that he could not control the situation because Deborah was on a Supervision Order and, consequently, the social worker had more power in that case than the educational psychologist.

The researcher believes that this conflict reflected both the demands placed on the resources available to social work departments and a commitment by the social worker to the principle of maintaining parental responsibility for children's welfare other than in the most exceptional cases.

Assessments can be a means for professionals to comply with bureaucratic and legal requirements, real or perceived

As government policy has led to educational psychologists increasingly playing an administrative role, by co-ordinating the assessment and recording processes, it is difficult to distinguish when they perform their role on behalf of children and their families from when they do so as part of their duties (because they have to) (Armstrong, 1995).

More than a quarter of educational psychologists interviewed stated that they had carried out a formal assessment not because they thought that it was important to do so but

because they had to do so because they got a referral from other professionals or from parents. Two main reasons for not wanting to assess the children's needs were identified. First, that the educational psychologists had known these children for a long time and already had some idea about their needs and what should be done for them in the future. Second, when they believed, from a short assessment that they had already carried out, that there was 'nothing wrong' with these children. The following example is typical of such situation.

A key worker in authority A referred to a case-study child, Richard, who was 4 years old and possibly had moderate learning difficulties, whose mother suffered from a mental disorder (she had depression). The key worker referred Richard to the educational psychologist who came to observe him once in his placement but did not do a home visit. The key worker believed that the educational psychologist in that case had underestimated the child's needs. She said 'although his appearance and behaviour seems to be normal if the educational psychologists had spent more time with him she would have noticed that he does react to the various tasks appropriately for his age and that he keeps repeating words'. The key worker thought that the educational psychologist should have spent more time with Richard before she reached a decision that he did not have special educational needs. The day-care staff contacted the educational psychologist again after some months and this time the educational psychologist promised to carry out a full assessment for Richard as soon as he moved into the assessment nursery.

Decision-making as a social process

In this sub-section it is argued that not only is the assessment and labelling of children **partly** based on concerns for individual children but also the decision-making in the special educational needs field is influenced by factors unconnected with the child in question.

Armstrong (1995) asserts that the state acts as a mediator between the different professions and their clients by defining who those clients should be and how they should be helped. In the special educational needs field, the power of the professionals involved in the assessment process depends upon their ability to negotiate aspects of their role with the state. Although in previous sub-sections (see chapter 7, section 'professional roles' and the previous section) it was shown that the state has acted as a mediator between professionals, and particularly between medical staff and educational psychologists, in their competition for dominance over the assessment process, reasons for such conflicts between professionals were not explained. It is pertinent here, therefore, to examine how professionalism has been developed and what are its implications for the assessment and decision-making processes for children with special educational needs and their families.

As there are several definitions of professionalism it is useful to look at the three main ones. According to Johnson, professionalism 'is a scientific ideology and as such has entered the political vocabulary of a wide range of occupational groups who compete for status and income' (1972:32). In Whittington's words, professionalism 'is a strategy of job control in which one of the main prizes is the right to define and determine situations in a given sphere of work' (1983:267). According to Weber, professionalism is also a

strategy for practising 'social closure'. Parkin (1974) has tried to explain what Weber means by this term. He states that social closure means the process by which collectivities seek to maximise rewards by restricting access and opportunities to a limited number of people.

Greenwood (1957) states that all professions possess the following : a body of systematic theory, authority given to their expertise by the clientele, a code of ethics and a professional culture. However, Carr-Saunders' (1964) typology of professional groups makes it clear that not all the so-called 'professions' fulfil the above criteria and, therefore, are not exactly professions but '*semi-professions*'. Etzioni (1969) states that this term is used due to the lack of a better term. In his own words, 'other terms which have been suggested are either more derogatory in their connotations (e.g. sub-professions or pseudo-professions) or much less established and communicative (e.g. "heteronomous" professions, a concept used by Max Weber' (1969:Preface). Thus, occupations such as law and medicine are considered to be '*established professions*' as they have both theoretical knowledge and an ethical code of practice, whereas teaching, social work, educational psychology and some other occupations are regarded as 'semi-professions' because they are largely based on technical skill rather than theoretical knowledge and the workers are 'paid servants of the state' which means that they carry out their work within the bureaucratic structures of local government and they are accountable to superiors in ways that fully-fledged professionals are not (the latter point is further explained below). At this point it is important to clarify that, although

professional groups can be assigned a position in the professional hierarchy, this is not a static situation and occupations are continually involved in a process of change.

This continuous attempt to rise within a professional hierarchy often obstructs inter-professional and inter-agency collaboration. As the process of professionalisation calls for a particular area of practice over which an occupational group holds a monopoly of expertise, all the occupational groups that belong to the 'semi-profession' category make efforts to maximise and/or consolidate their own areas of control and to minimise the control of it by others. Such occupational groups are, therefore, engaged in a process of establishing boundaries between themselves and other occupational groups, maintaining differences at various levels between them and demonstrating that their occupation is autonomous and capable of doing something that nobody else can (Satyamurti, 1981; Wilding, 1982). However, as noted earlier, the state acts as a mediator between professional groups and there is not absolute professional autonomy because, as Friedson (1975) explains, the state has ultimate sovereignty over all and grants conditional autonomy to some.

Armstrong (1995) argues that the power of professional groups is not derived from their professional expertise but from their administrative role within the bureaucracy of the state. The researcher believes that these factors are interrelated because if we take the administrative role of the educational psychologists as an example, educational psychologists would not have been given a central role by the state (co-ordinators of the assessment process) if their role have not been viewed as crucial in the assessment process (experts in assessing children's educational needs). Another point that it is

important to make here is that boundaries in the administrative role between education and social work professionals are not always clear. As was shown in the previous subsection, although the role of the education officers includes the decision-making as to the school placement of children with special educational needs, in cases of children who are registered in child protection and also have special educational needs, the social workers decide about the service provision that will be offered to these children and this may cause conflict between the professionals as was the case with Deborah.

However, as is shown in the remainder of this section, the decision-making process is not only influenced by conflicts between educational psychologists and social workers but also by conflicts between educational psychologists and their administrators as well as between educational psychologists and parents of children with special educational needs.

As several authors rightly point out educational psychologists are working in an unenviable environment. Their job is characterised by inadequate resources for the task and by ambiguous and often unrealisable expectations of performance (Tomlinson 1981; Riddell, 1996; Galloway et al 1994).

As Galloway et al (1994) rightly argue educational psychologists are in a particularly ambiguous position because they have several 'clients' (children, parents, education officers and, in the case of school-age children, also teachers) who have different and often conflicting interests.

'Although their training and experience appear to place them at the heart of the process, there are powerful constraints on their freedom to serve the children and parents who constitute their primary clients. They also have to provide a service to schools and to LEA administrators, and the legitimate expectations of these secondary 'clients' provide the context within which they work' (1994:101).

One example from the children's case studies that demonstrates such situation are the twins Rebecca and Jessica. As was shown earlier, the parents of Rebecca and Jessica were very dissatisfied with the educational psychologist's decision both in relation to the school placement and to the additional support that was provided in that placement (they preferred their children to be sent in a special school rather than a mainstream school, and they wanted the children to be put into two different classrooms). During the interview the parents mentioned only once the involvement of the head-teacher in the decision about the additional support that was provided to the children. They only said that the head-teacher did not seem to share their concerns, and there was no mention of the role of the education officer. When the educational psychologist was asked, in a second interview, about the decision-making as to the school placement of these children, she explained that this was a difficult case because there were differences in opinion between the education officer, the head-teacher and herself as to the school placement and extra support for Rebecca and Jessica and that she was relieved to see that the parents, at a later stage, seemed to be more accepting of the educational placement and, thus, that the

problem was resolved. As she did not communicate to the parents her differences in opinion with the education officer, she was perceived as not caring by the parents.

At this point one could argue that the description of the role of the educational psychologists throughout this study, that of having discretionary powers concerning the decision-making as to the educational provision for children with special educational needs, does not fit with that of educational psychologists as oppressed groups. This paradox can be explained in the following way. Although the state defines the clients and requires educational psychologists to comply with some general guidelines, the nature of their work allows them some discretion in their decision-making.

Feldman (1992) defines discretion as 'the legitimate right to make choices based on one's authoritative assessment of a situation' (1992:164). Thus, according to this definition, discretion is exercised when a professional, whose job it is to do so, makes choices based on an assessment that is or can be justified by reasons. In the case of educational psychologists, therefore, one would expect that, when they exercise discretion concerning the educational provision, their choices are always based on an assessment that is or can be justified by reasons. However, this study showed that educational psychologists do not always make recommendations based on a prior assessment and, perhaps more importantly, they do not usually give reasons for their decision-making although they could do so if they wished to (in the previous sub-section it was shown that sometimes the decision-making about the educational provision preceded the assessment of the children's needs whereas in the section 'communication and relationship issues' it was

demonstrated that the educational psychologists did not usually feel that they have to justify their recommendations, to other professionals and, thus, they did not do so).

Feldman (1992) goes on to argue that her definition of discretion is consistent with the idea of decision-making within a structure of rules. The rules put limits on the authority of educational psychologists to make decisions or recommendations. This, however, does not imply that educational psychologists always make correct or fair decisions but that there are limits on their discretion.

A quarter of the educational psychologists in this study reported that they always tried to make an objective decision based on a thorough assessment but this was not always feasible and there were times when they realised that they had not made the best recommendation about educational provision. Of course, one has to consider that assessment is not always easy, particularly when it involves assessing children with complex needs. For example, one educational psychologist explained that he was not certain about the assessment of one child's needs because it was really hard to assess whether the child's delayed cognitive developmental could be attributed to the child's hearing impairment or to learning difficulties. Another factor that we need to take into account is that children's development and behaviour can change considerably in a short period and that although one particular placement may seem to be the most appropriate one at one point in time, because of dramatic changes in the child's development, it may no longer be suitable four or five months later. Thus, reviewing/re-evaluating the services offered to children with special educational needs is of great importance.

A few educational psychologists noted that it was difficult sometimes for them to be objective when they chaired a resource allocation meeting about which children would and which would not get some educational resources. They preferred to offer educational provision to children that they were known to them, rather than to children that they did not know as they did not want to disappoint parents with whom they had been in contact. Thus far we have established that educational psychologists have been given discretionary powers but we have not explained the reasons for discretion.

Many authors argue that discretion is a necessary part of practitioners work because they often deal with cases which are complex and individual and general rules give little guidance. In addition, the practitioners can not usually wait for their supervisors to make decisions for them because they do not work under the direct observation of their supervisors and some decisions are urgent and they have to be taken on the spot. Thus, the exercise of discretion involves taking into account the idiosyncratic features of specific cases (Tomlinson, 1981; Goacher et al, 1988; Galloway et al, 1994)

In the case of the assessment of special educational needs, educational psychologists have to take into consideration the holistic needs of the children. This involves all the factors that influence the children's lives including the family needs and parental preferences. In practical terms this means that if, for instance, two children suffer from cerebral palsy and their condition is similar they will not necessarily be allocated to the same educational provision because when the educational psychologist has considered the assessment reports from all the professionals involved (including his own), and, hopefully, worked closely with the parents he may decide that a mainstream school with

additional support would be most appropriate for one child whereas a special school is most appropriate for the other.

The dissimilar treatment of clients is often perceived as appropriate. It can, however, be perceived as unfair or, in other words, unjust. This will be the cases where decisions are based on idiosyncratic considerations which are not relevant to the established goal of the process. An example of this situation in the study was where some educational psychologists decided to offer educational provision to those children that they worked with. In addition, as was shown in the previous sub-section, some educational psychologists in authorities A and B did not either follow the local policy guidelines or base their decisions on idiosyncratic considerations. They, instead, had their own set ideas, about appropriate types of educational provision, which means that they were either for or against mainstreaming and thus for or against special schooling, and they tended to make the same recommendations in all cases.

Summary

Although the majority of parents were dissatisfied with the assessment reports produced by educational psychologists and with their involvement in the assessment process, the majority were content with the school placements allocated to their own children.

The study revealed that, due to pressure of work it was the common practice for educational psychologists to delay the initiation of a formal assessment until children were of school age. Although the government prescribes 'needs led' assessments rather

than 'resource led' ones, this was difficult to achieve in some authorities due to a lack of resources.

Evidence was found in the study to support the claim that the assessment and recording of needs are not always objective and welfare enhancing processes. The existing assessment procedures tend to favour middle class pupils and to disadvantage other groups such as working class and ethnic minority group children. Moreover, they can have a number of other functions, that is they can be a means to justify restricting access to certain services; to prove that professionals have a more realistic view of children than their parents; to monitor the relationship between parents and children; to make a case for the existence of certain services.

The study also revealed that decisions about school placements are not solely based on the children's needs and circumstances but are influenced by a number of other factors such as the struggle for professional dominance in the special educational needs field, the discretionary powers of the educational psychologists and their relationship with their different and often conflicting clients (administrators, educators, parents and children).

Although some children's needs are met through special educational needs proceedings, they do not exist solely to promote the best interests of the child and also function to benefit professionals, the education system and ultimately the wider society.

Having discussed the main issues affecting the assessment and decision-making processes it is now time to pull together all the factors that influence collaboration, between educational psychologists and social work staff, in this area.

CHAPTER 9

CHAPTER 9

EXPLORATION OF FACTORS THAT INFLUENCE INTER-PROFESSIONAL AND INTER-AGENCY COLLABORATION AND RECOMMENDATIONS FOR CHANGE

Introduction

Davidson (1976) claims that any study of inter-organisational relationships requires the examination of both the environmental and intra-organisational factors that influence such relationships. According to Davidson (1976) the researcher should first consider the relevant environmental context and the nature of the demands it exercises on organisations to change (examination of the political and social pressures, legislation and demographic funds). Once the external factors in the environment have been examined, Davidson (1976) asserts that attention should be given to organisational factors which affect the organisation's need and ability to respond to challenges or opportunities found in the environment (examination of interdependence, goals/domains and structures). Broskowski et al (1982) in their study in the field of mental health services in the USA make a distinction, similar to Davidson's between environmental and intra-organisational conditions but they also rank identified factors on a continuum from inhibitory to facilitative (Appendix 3.1). As not all of the these factors were relevant to the study the researcher reproduced a table, similar to that of Broskowski et al, which summarised only those aspects which were directly related to the findings (Appendix 3.2.).

Three data sources are used in this chapter : literature on inter-agency relations, findings from the checklist used in the semi-structured interviews with educational psychologists and social work staff, and data from these interviews. Before proceeding to examine the factors that influence collaboration between education and social work staff in assessing children's needs it is important, to clarify that since there was considerable overlap between the findings from the checklist and the semi-structured interviews they will not be examined separately.

SECTION A: ENVIRONMENTAL FACTORS THAT INFLUENCE COLLABORATION BETWEEN EDUCATIONAL PSYCHOLOGISTS AND SOCIAL WORK STAFF

Before proceeding to an examination of specific environmental variables inhibiting or facilitating inter-agency relations it is important to offer a brief picture of the current economic, political and social situation.

Economic, political and social factors

According to Davidson (1976) an organisation, like any organism, must adapt to changing conditions in its environment if it is to survive. External factors in the environment should, therefore, be investigated and particularly the ways in which they create the necessary preconditions for inter-organisational collaboration by affecting an organisation's ability to function independently. This involves the examination of a number of factors including *the economy, political and social pressures, legislation,*

availability of funds and demographic trends. Davidson (1976) suggests that the investigation of these parameters should be guided by an attempt to answer the following question :

'What effects are political institutions, the state of the economy, and pressures from various groups in the society having on the organisations ?' (1976:122).

Adler and Asquith (1981) among others pointed out that in a period of low economic growth, high unemployment and incipient inflation, many powerful demands for resources are made on the state. This does not mean that education and social work services cannot grow but that, inevitably, there will be strong pressures on them not to do so as consumption and investment in the public and private sectors compete with education and social work services for scarce resources. Although the economic situation today is very different, the scarcity of resources for welfare services remains an unresolved problem. Lipsky (1980) asserted that 'there is no limit to the demand for free public goods' and concluded from this that welfare agencies will always feel under pressure. This study supported Lipsky's statement as many respondents mentioned scarcity of resources in their department as well as their frustration at having to work in a pressurised environment (see chapter 7, sections 'communication and relationship issues' and chapter 8, sections 'functions of the assessment process: who benefits ?' and 'decision-making as a social process').

With regard to social pressures, the stigmatisation that is often attached to the social work department and, consequently, to the social work staff, militates against close collaboration between education and social work authorities in assessing children's special educational needs. As explained in chapter 7, since many educational psychologists were of the opinion that a lot of parents held a negative view of the role of the social work service they usually avoided asking parents directly about social work involvement.

Moreover, as shown in chapter 5, the decline in the population of children and the rise in the population of elderly people have impacted upon the increase in child care expenditure and, thus, there is little chance of enhancing the substantive rights (increase of services and other resources) of parents and children with special needs in the near future. However, as Adler and Asquith (1981) argue, the prospect of enhancing procedural rights (e.g. parental involvement in the decision-making in the assessment process), particularly if this does not involve additional substantive rights which would, in turn, entail additional public expenditure, may be very attractive.

'The gains to the state from such a strategy may be quite considerable - it may increase the legitimacy of government, inhibit potentially less acceptable demands for increased substantive rights and entitlements and satisfy the recipients of welfare without significantly altering the distribution of power in society' (Adler and Asquith, 1981:18).

Implementation

Since implementation of various policies in the welfare agencies is a very complex process sudden or sporadic attempts are very likely to inhibit inter-agency collaboration whereas gradual, well-planned implementation can, instead, facilitate it (see Appendix 3.2.).

Goacher et al (1988) argue that implementation is not 'a simple linear process where policy statements, in the form of legislation, emanate from the top of a hierarchical system and are implemented in a systematic way by organisations set up for the purpose' (1988:19). Goacher et al (1988) go on to say that this is particularly the case in education, health and social work departments which are staffed with people who have their own priorities, conceptualisations of client needs and ways of working (see sub-section 'decision-making as a social process').

Barrett and Fudge (1981) have stressed the need

'to consider implementation as a policy/action continuum in which an interactive and negotiative process is taking place over time between those seeking to put policy into effect and those upon whom action depends' (ibid:25).

The remainder of this sub-section demonstrates how the implementation of specific requirements within the Education (Scotland) Act 1981 and Children (Scotland) Act 1995 concerning inter-agency collaboration is influenced, positively or negatively, by other requirements within the same or other Acts or by local government and policy changes.

Goacher et al's (1988) study showed how the implementation of the Education Act 1981 was affected by other changes which were taking place at that period, such as moves towards care in the community, which were not directly connected with that Act. Tisdall, (1998) refers to an example of contradictory aims and priorities in two policies which are related to the special educational needs field (Education (Scotland) Act 1981 and Children (Scotland) Act 1995).

'Education law and policy is predicated on the collective needs of children rather than individual children; social work, and in particular the Children (Scotland) Act 1995, focuses on the individual needs of the children. Children most disadvantaged will be the ones prioritised for services under the 1995 Act, and education departments could find themselves with specific expectations to meet such children's needs while simultaneously having different policy priorities stemming from the Scottish Office Industry and Education department' (Tisdall, 1998:8).

Because education and social work authorities work responsibilities are derived from different sets of legislation there is a tendency for them to concentrate on what they are responsible for rather than on co-operative activities, which may in turn lead to an emphasis on reactive rather than proactive responses (Dyson et al, 1998).

An example of positive influence in the implementation of inter-agency collaboration is the Local Government (Scotland) Act 1994 which introduced significant constitutional change at both national and sub-national levels. The Act abolished 62 of Scotland's 65 councils with only the 3 islands councils continuing to exist. Since April 1996, Scotland

now has 32 councils. Each locality has now a single council responsible for all local government functions (single tier structure) in contrast to the previous two-tier arrangement where each area was served by one of 9 regional councils and also by one of 53 district councils. The support for a single tier structure came from a wide range of interests, including local authorities, business interests, community councils, representatives of various political parties and individuals. The central message was that the local government re-organisation would be more cost-effective as it would increase co-operation between local councils, departments within the same council and between different sectors (public, private and voluntary) (The Scottish Office, 1992; 1993; 1995).

Thus, the implementation of legislation involves the consideration,

'not only of the legislation itself, but of other government policies which will impinge upon the work of implementers. It also involves consideration of the structure of the implementing organisations, their relationships with one another and with central government. It is not a hierarchical process in which orders from the top are filtered down through the organisation until they reach the level of the individual worker' (Goacher et al, 1988:20).

It is not surprising, therefore, that many people who are involved in implementation claim that one of the most important pre-conditions for effective implementation is that of a gradual implementation process. Thus, the first few years after the enactment of a piece of a legislation should present a transitional period during which time the respective

departments are expected to work out local policies and plan training programmes related to the legislation (Lipsky, 1980; Young, 1981; Hogwood & Gunn, 1984; Hill, 1997).

The sub-section 'the impact of the children (Scotland) Act 1995 on the frequency of collaboration' in chapter 7 has shown that the education and social work departments were in a transitional phase with regard to the implementation of the Children (Scotland) Act 1995. Managerial staff in these departments held a number of meetings to plan for joint training and the production of local guidelines for joint assessments. Moreover, the study found that there was already some increase in the frequency rate due to the Act, which also confirmed the fact that the implementation process was gradual.

However, as stated earlier, gradual implementation is only one of the important aspects of effective implementation, and, thus, in our case for successful inter-agency collaboration. According to Hogwood & Gunn, (1984) sufficient resources should also be available and the agreed objectives should specify in detail the tasks to be performed by each participant. Unfortunately, neither of the above two pre-conditions for the implementation of the Children (Scotland) Act 1995 have taken place. Education and social work department staff were asked to develop and maintain close links but neither did national guidelines specify the tasks to be performed by the staff involved nor were additional resources provided for organising joint training, recruiting new staff, acquiring new equipment and expanding the services offered to children who are having special educational needs and their families. These issues are further discussed in the following sub-section.

Resources

Collaboration/co-operation is widely accepted as an appropriate policy response in a situation of limited resources in which the most cost-effective solutions are sought, and awareness of resource dependencies as a powerful incentive to inter-agency collaboration is noted in many situations (Leuenberger, 1973; Kane, 1975; Longsdale et al, 1980; Kazemak, 1991). The studies of Broskowski et al (1982) & Challis et al (1988) revealed that when resource levels are particularly high or particularly low they obstruct inter-agency collaboration.

'In situations of chronic resource shortage, the consolidation of resources and the protection of activities seen as central to the organisation are important tasks, with less attention paid to collaboration in consequence. In times of plenty, agencies can pursue their goals on the basis of internal resources, without engaging in collaborative activity' (Hallett & Birchhall, 1992:69).

The findings in this study were consistent with those mentioned in the previous paragraph. As illustrated in the sub-section 'scarcity of resources and its implications in the relationship between education and social work staff' in chapter 7, scarcity of resources was almost unanimously addressed as an obstacle to inter-agency collaboration and almost three quarters of the education and social work respondents reported that pursuit of resources of the other department was the root of the conflicts between them. In addition, a few respondents added that if both departments had had sufficient resources, they might have been reluctant to collaborate because they would not have felt

the need to do so anymore. Thus, between the two positions (abundance and scarcity) lie opportunities for effective inter-agency collaboration (see Appendix 3.2.).

At this point it is important to emphasise that the problem of insufficient resources was not limited to insufficient material resources (insufficient educational placements and equipment) but extended to human resources (insufficient numbers of administrative and professional staff). The latter issue turned out to be crucial in the study (both semi-structured interviews and the checklist indicated this). The scarcity of human resources was a factor for both departments and resulted in less face-to-face contact, lateness and missing of formal and informal multi-disciplinary team meetings, records not being kept up to date, late notification of cases, reports not being submitted on time and burn out of staff. Hall et al (1977) in their study of agencies dealing with adolescents argued that frequency is an important measure of inter-agency collaboration and organisations will only interact if such interaction is important to them (See Appendix 3.2.). The actions to which education and social work departments devote the scarce resource of time are an indication of their priorities and, thus, of the degree of importance imputed to these collaborative activities. As was shown in chapter 7, the most common case was that educational psychologists saw the social workers only once (usually in a formal multi-disciplinary meeting) when assessing a child's special educational needs and the day-care staff three or four times (including the review meetings which were taken place every six months). This shows that, due to pressure of work, professionals devoted only a minimum amount of time to their collaborative relationship.

SECTION B: INTER-ORGANISATIONAL FACTORS THAT INFLUENCE COLLABORATION BETWEEN EDUCATIONAL PSYCHOLOGISTS AND SOCIAL WORK STAFF

The comparative properties approach

The comparative dimension is viewed by Hudson (1987) as a determinant of the occurrence of collaborative activity and a factor in its continued existence and success.

Hudson argues that the comparative properties approach entails

'examining the similarities or differences of interacting groups or organisations on certain attributes or dimensions which constitute a set of conditions that continually influence the pattern of interaction. In effect, the comparative properties are seen as independent variables and any subsequent collaborative mechanism as dependent variables' (ibid:178).

In this section we concentrate on the variables that they were found to be relevant to the study.

Dependence

In this sub-section it is shown that reciprocal dependence, or interdependence not only facilitates inter-agency relations but also is a necessary pre-condition for inter-organisational relations (see Appendix 3.2).

Litwak & Hylton (1961) have identified three modes of organisational co-existence, each with different implications for the likely development of collaborative relationship, namely *independence, interdependence and conflict*.

Two organisations are believed to be independent of one another if neither needs the other's resources to achieve its goals, and if neither interferes in the other's goal achievement. When this happens, there is little need for exchange between the organisations as each may pursue its own ends without taking the other into consideration. Two organisations are said to be interdependent if each organisation believes that it will accomplish its own goals most effectively with the assistance of the other's. Thus, interdependent organisations engage in exchanges of resources in order to serve one another's goals. In chapter 7 it was shown that there were several mutual benefits of collaboration between educational psychologists and social work staff and, thus, of interdependence (see Appendix 3.2).

Molnar and Rogers (1979) argue that interdependence may result in conflict since it is likely to increase awareness of latent antagonisms or conflicts. However, conflict may also arise when the goal accomplishment of one organisation occurs at the expense of the goal achievement of another. For example, there may be conflict over resource inputs and/or outputs. The educational psychologists and social work staff in this study were not only engaged in exchange relationships but also in some power/resource dependency interactions and a common reason for disagreement and conflict was the pursuit of the resources of the other department (see chapter 7, sub-section 'scarcity of resources and its implications in the relationship between education and social work staff').

Inter-organisational homogeneity Inter-organisational homogeneity is concerned with the extent to which the members of organisations engaged in a collaborative activity exhibit structural similarities (see Appendix 3.2). This involves the consideration of a number of issues such as similarities and differences in budgetary allocation, size and number of employees, administration, prioritisation, definitions/terminology, and mode of working. Reid (1969) asserts that although structural similarity is not a prerequisite for the initiation of collaboration, it is likely to lead to additional cohesion, and more extensive and stable exchanges (see Appendix 3.2).

Concerning budgetary allocation, it is important to note that Scottish education and social work departments are financed in the same way and consist the two main areas of local government spending (Scottish Local Government Information Unit, 1998 a-c).

The occurrence and frequency of inter-agency collaboration is also influenced by the bureaucratic procedures of the collaborating parties. Rose & Marshall's (1974) study found that although intervention by teachers and social workers in selected comprehensive schools was capable of reducing the delinquency rate and levels of personal and social maladjustment, the *administrative problems* and, in particular the 'internal impetus' of these agencies, led them to grow apart. Goacher et al's (1988) study of policy and provision for special educational needs reached a similar conclusion with regard to inter-agency collaboration between education, social work and health departments staff as the following quotation illustrates. '... the first attempt to get a co-ordinated approach between education, health and social services became so acrimonious

that it was felt necessary to postpone any future attempts until certain key figures had retired' (1988:38).

Two administrative problems were identified in this study. A few educational psychologists and social work staff reported that sometimes referrals were lost and/or delayed due to lack of, or shortage of, clerical staff. Secondly, as shown in chapter 7, section 'professional roles', the late notification of some children with special needs and the existence of deadlines for assessments sometimes inhibited collaboration.

Birchall & Hallett (1995) amongst others suggest that one important structural issue concerning inter-agency collaboration is the *different priority* of the activity in total workload of the collaborative partners and this was supported by both semi-structured interviews and checklist). Although children with special educational needs are perhaps the main priority of educational psychologists this is not the case for social workers. Packman & Randall (1987) have characterised the priority social workers' give to child protection cases as 'the monstrous cuckoo' which threatens to consume the whole of child care work. In social work authorities staff it is common for officers of principal rank to be involved in child protection work, but this is uncommon among staff involved in children with special needs. Moreover, social work professionals referred constantly to Social Work (Scotland) Act 1968 and to Children (Scotland) Act 1995, rather than to the Education Act 1981 or other subsequent educational legislation. As discussed in chapter 7, many education and social work respondents acknowledged that many social workers were unfamiliar with the detail of the assessment and recording processes and the general

feeling was that education policies have had little impact on the world of social work (the issue of awareness of each other's roles is further discussed below).

Moreover, as shown in chapter 1, one of the main criticisms of policy and legislation in this area is that there is no shared definition of a population which is the subject of inter-professional and inter-agency collaboration. Terms such as 'special educational needs', 'children in need', 'children at risk', 'additional needs' are subject to different interpretations within agencies and by individuals. Thus, amongst education staff the term 'special educational needs' refers to a broad population of children who may experience difficulties at some point in their school career whereas amongst health professionals, may be understood in a narrower sense to refer to a relatively small group of children who have medical needs which are the subject of particular medical interventions. Social work personnel often interpret the term 'special need' by referring to children with disabilities.

Differences in the mode of working were also found to influence inter-professional and inter-agency collaboration. While the social work staff have the wider needs of the child's family to consider, the educational psychologists tend to focus on special educational needs and this can lead to different priorities for the professionals (see chapter 7, section 'ease of collaboration'). The fact that the educational psychologists work essentially with the child and not the family influences how they perceive the effects of the family upon the child and means that the child's needs are given priority. Likewise, the social worker's commitment to work with the family can mean that family problems are given priority.

A social worker referred to a case where she agreed with the educational psychologist that, in terms of education the child would benefit from a nursery school but thought that the child should be placed in a day nursery because the mother needed some time for herself and, that a full-time day nursery placement would be most appropriate in that case. Similarly, in the case of Deborah, the educational psychologist was of the view that because Deborah's behavioural problems were increasing as a result of her home circumstances, the social worker should remove the child from the family. However, the social worker thought that this was not the best intervention, because after working closely with the family, he had come to the conclusion that there were many positive aspects in the home situation, and that all the possible ways of changing the negative aspects should be explored, leaving residential care as a last resort. Again, the educational psychologist concentrated on the special educational needs of the child and not on her holistic needs which included her family needs whereas the social worker tried to decide what was best for both Deborah and her family (see chapter 7 and 8).

A further consequence of the working context are *differences in perception of time-scales*. Day-care staff work closely with children for limited periods of time whereas the educational psychologists usually work with children who are having a Record of Needs throughout their school years since a review meeting takes place every six months. However, this is not the case for social workers as they operate to a much wider and more flexible notion of time than the two groups of professionals mentioned above. The study found that this can lead to tensions between educational psychologists and social work staff (both day-care staff and social workers). A few day-care respondents reported that

they sometimes felt frustrated or angry towards the educational psychologists because of their 'come, assess and leave' approach. They explained that the reason for having such feelings was that the educational psychologists did not always seem to understand the daily problems that they were facing with some children with special educational needs, as they seldom offered them any advice or suggestions of how to treat these children. Similarly, some social workers expressed their frustration at the educational psychologists' 'come, assess and leave' approach because they sometimes felt that the educational psychologists did not allow time to get to know the family and their background in order to be able to suggest the most appropriate package of services.

Another inhibitory factor in the collaborative relationship between educational psychologists and social work staff was that of *confidentiality* (see Appendix 3.2.). As discussed in chapter 7, the social work staff's concerns regarding their ethics of information sharing sometimes led to the withholding of important information and this, in turn, resulted in conflicts between these groups.

Lack of joint training in collaborative practices may exacerbate many of the difficulties mentioned above, as professionals may not have experience in working together and, thus, they may feel frightened about doing so in the future. None of the three case-study authorities had any joint training either about inter-agency collaboration or about the role of professionals involved in the assessment of children's special educational needs. However, all authorities' future plans included joint training on inter-agency collaboration.

Organisational goals/domains

Davidson (1976) refers to the extent to which domain consensus exists among organisations. As discussed in the analysis of the social exchange perspective, domain consensus is one of the central determinants of organisational interdependence (see section B of chapter 2 and section B of chapter 7). Thomson (1967) defines domain consensus as

'a set of expectations, both for members of an organisation and for others with whom they interact, about what the other organisation will and will not do ... it provides an image of the organisation's role in the larger system, which in turn serves as a guide for the ordering of action in certain directions and not in others' (In Hudson, 1987:366-7)

According to Hudson (1987) the establishment of domain consensus calls for the resolution of some potentially difficult issues. First, it requires agreement on specific organisational goals and, second, it requires a compatibility of organisational goals, philosophies and reference orientations. Although some education and social work respondents believed that they and the staff in the other department had similar aims, focus and perspectives evidence indicates that this was not always the case (see chapter 7, section 'ease of collaboration').

Hudson (1987) goes on to say that when organisations have similar domains, they are likely to be aware of one another and to make available the resources needed to help each other achieve their goals. However, identical or similar domains also increase the

possibility for territorial disputes and competition (see Appendix 3.2.). Hvinden (1994) offers two reasons for this. First, when two agencies have identical or similar goals it is very likely that they will be forced to compete for the same pool of resources and, inevitably, this leads to disputes and conflicts between them. Secondly, similarity in the domains can lead to overlapping/blurred roles and this, in turn, may be perceived by professionals as a threat to their autonomy which can result in disagreements and/or conflict (for further discussion on professionalism issues see the last section of chapter 8). In principle, the identification and assessment of children's needs is a collaborative process. In practice, however, this study indicates that agencies operate with different definitions of need and are responsible for different aspects of provision. Disputes could, therefore, arise where an assessment by education department is seen to have resource implications for the social work department or vice versa. On several occasions, educational psychologists were concerned about the tendency of social work staff to recommend a specific placement for a child (which they might not be able or willing to resource) and, as a result, disagreements and conflict were generated. Some educational psychologists felt that this problem was exacerbated by the failure of social work staff to understand the funding implications of their recommendations. Thus, professional's expectations of autonomy and competition over limited resources seemed to inhibit collaboration between education and social work authorities (see chapter 7, section 'professional roles').

Network of awareness

It has already been explained that interdependency facilitates inter-agency collaboration. Hudson (1987) asserts that interdependency is not enough for engaging in collaborative activities, organisations should also have awareness of their interdependence. This implies that not only should agencies be aware of one another's existence and the role of the professionals involved in such collaborative activities, but also that they should perceive a feasible matching of goals and resources that would lead to more effective goal achievement (see Appendix 3.2.).

In the previous sub-section, it was noted that education and social work respondents were not only aware of one another's existence but could also discuss the similarities and differences in their domains, focus and perspectives (although differences in opinion were identified). The study also found that educational psychologists in the detailed case study areas had a clear view of the role of social work staff (both day-care staff and social workers). Similarly, day-care staff were clear about the role of the educational psychologists. However, this was not the case for social workers. As social work practitioners did not often collaborate with educational psychologists many social workers were not always clear about the role of the educational psychologists and the SEN procedures (see chapter 7, sub-section 'the role of social work staff in the assessment of special educational needs'). In addition, as the postal survey revealed many social work departments did not have designated SEN officers, and as some social work staff themselves reported their department lacked clear structures for responding to SEN

issues. In the absence of these arrangements, such responses may well be dependent on the energy and commitment of individual workers in various parts of the system.

Many people including Bond et al (1985) argue that physical proximity and stability of staff are related to network awareness since the more professionals in different agencies see one another, the more they learn about each other's role, skills and financial constraints (Armitage, 1983; Challis et al, 1988; and Hallett, 1995) (see Appendix 3.2.).

As far as stability of staff is considered, many respondents from both departments expressed their annoyance with the frequent change of caseworkers. Sometimes there were delays in reallocation which caused discontinuity in the provision of support to the child concerned. These changes and discontinuities can not only be disturbing for the child and the family, but also require the staff involved to invest time and energy in building a relationship with both the child and the other professionals.

Physical proximity also proved to be important factor in this study, particularly in authority C. Many education and social work respondents in authority C mentioned that working in a small authority had great advantages since people knew one another and, thus, it was easier to 'slot people in'. However, a few respondents expressed their concerns about working in a small inter-agency network. These respondents mentioned that there were dangers in avoiding open confrontation, for instance over professionals who did not do their job properly, on the grounds that the professionals did not wish to spoil the friendly relationship with the other person.

A few respondents in authorities A and B referred to the importance of organising social events, where staff from various departments took part. These respondents explained that

they had organised 'experimental' coffee afternoons in order to get to know the people that they had worked with but whom they may have never met personally. One social work respondent in authority A said 'You do not know how wonderful it is to put a face to a person you have contacted several times, it makes a whole difference'. In addition, many respondents commented on the importance of stability of staff. They explained that it was really disruptive to have to work with different professionals on a particular case because, as one educational psychologist mentioned

'once you get to know the people it is easier, they know how you work and you know how they work but if you change the person you have to start all over from the beginning and this can be really disadvantageous and upsetting for parents'.

SECTION C: IMPLICATIONS FOR POLICY, PRACTICE, EDUCATION AND RESEARCH

If education and social work staff are to be able to collaborate closely and effectively in assessing children's special educational needs, they must find some way to acknowledge and resolve the conflicts inherent in their relationship. Change is necessary in order to bring about the atmosphere required for the negotiation of conflict, and change can be envisaged in three areas; in policy, practice and education.

Stern et al, (1977), in their chapter on mechanisms for managing conflict between organisations, identified three major structural variables that influenced conflict management. These are dependency, power and intensity. Stern et al argue that the

optimum conditions for effective conflict management are a high level of mutual dependence, equality of power and a relatively intense relationship, i.e. frequent contact and a high level of resource investment. Since the last two variables were notably absent in the authorities studied (see chapter 7), this sub-section focuses on the changes that need to take place in order to provide conditions more conducive to conflict management and, thus, on recommendations for improving inter-agency collaboration in the special educational needs field. At this point is important to mention that the following recommendations are based on empirical data and, more specifically, on the data collected in the last section of the general semi-structured interviews with education, health and social work professionals dealing with strategies for improving inter-agency collaboration, (see Appendix 2.6).

Implications for policy

Legislation provides the overall framework within which the organisation of inter-agency collaboration for children with special needs is structured. The major source of inequality of power in the relationship between education and social work authorities lies in the legislation. As explained in chapter 1, the Education (Scotland) Act 1981 gave the power to education authorities to **determine** whether it is appropriate to request the advice and support of the social work department in assessing children's special educational needs assessment but no equivalent power was given to social work departments when carrying out their own assessments. However, the requirement in the Children (Scotland) Act 1995 on '**corporate**' local authorities (as defined in the Local Government (Scotland) Act

1994) to safeguard and promote the welfare of children in need in their area; to promote the upbringing of such children and their families, by providing a range of services appropriate to children's needs; to share information; and to make arrangements for joint assessments and provision, is expected to redress the balance of power and increase the frequency and intensity of inter-dependence and intensity (see section B of chapter 1).

This study has also shown that the government's call for closer collaboration is not enough to increase the frequency and improve the quality of such interactions (see subsection 'the impact of the Children (Scotland) Act 1995 in the frequency of collaboration' in section A of chapter 7). However, as Nocon (1994) argues, the government is in a position to exert stronger influence on authorities, using some degree of manipulation or coercion. Examples include encouragement from central government for joint initiatives and the 'Care in the Community' pilot projects. In these cases, additional money is made available on condition that authorities work together. The injection of new resources can, thus, be used to encourage closer collaboration between departments. This not only gives legitimacy and authority to collaboration but also sends a clear message to the respective departments that the government is committed to this objective and that the necessary time, resources and effort should be devoted to this task.

Implications for practice

Change in organisational structure can be visualised at various levels, from the macro-level of the department to the micro-level of management and the job descriptions of

individual workers. These are, however, all inter-dependent since change in one area necessarily has implications for others.

Clear local guidelines

As it was shown in the sub-section 'Awareness of social workers' involvement and criteria of collaboration' in section A of chapter 7, absence of criteria for collaboration with staff in the social work department staff led educational psychologists to the construction of their own criteria which, in turn, led to a restriction in the frequency and intensity of collaboration. The lack of criteria for recording children's needs and for making decisions about the children's school placement resulted in increased professional discretion and this, in turn, led to unfairness in the relevant procedures (see sub-section 'decision-making as a social process' in chapter 8). Moreover, the lack of an agreement about information-sharing between education and social work staff in assessing children's needs often led to disagreements and/or conflicts between them (see sub-section 'information sharing issues' section A in chapter 7). These, and other related issues, such as a lack of clarity in the assessment and record of needs processes (see sub-section 'professional roles' in section A of chapter 7) could be addressed by the establishment of clear local guidelines.

Each authority should draw up a clear policy statement on how it proposes to meet children's special needs given its particular historical, geographical and political context. This statement should include clear aims and objectives for inter-professional and inter-agency collaboration in the field of special educational needs, criteria for collaborating

with other agencies, criteria for recording children's needs and for making decisions about the children's school placement. As far as the transfer of confidential information between agencies is considered, a written agreement between the agencies involved should be included in the local authority's statement concerning the degree to which 'confidentiality' has to be maintained and the extent to which information can be devolved to casework level. As shown throughout the thesis, commitment to the sharing of relevant information is an important indicator of trust and without it there is no sound basis for collaborative working. In addition, this statement should include clarification about who is expected to do what, when and where. It is important here to emphasise that this policy statement will only lead to effective practice if it is drawn up jointly by education, health, social work departments, voluntary organisations and service users. (the above recommendations are drawn from data from the semi-structured interviews with professionals with regard to strategies for improving existed collaborative activities).

Dyson et al (1998), in their study about inter-agency collaboration in England between schools, LEAs, health and social services in the special educational needs field, suggest that **inter-agency collaboration should aim :**

1. to enable agencies to meet children's special educational needs more effectively ;
2. to increase multi-agency use of existing facilities and resources through joint planning and initiatives ;

3. to develop, whenever possible, multi-agency provision and greater locational integration of services and professionals in order to avoid duplication of work (e.g. child development centres) ;
4. to establish joint monitoring and evaluation procedures to review both individual initiatives and long-term plans ;
5. to collaborate over the establishment of compatible systems for recording, storing and transferring data ;
6. to investigate ways in which children with special educational needs and their families have a higher level of participation in decision making ; and
7. to review on a regular basis opportunities for multi-professional training especially at operational level.

Moreover, inter-agency collaboration should involve :

1. the establishment of monitoring systems to ensure that requests for information to meet statutory obligations are met within agreed timescales ;
2. the establishment of mechanisms for dealing with issues of joint funding ;
3. written information of the range of services the involved agencies provide and the means by which they assess children's needs ;
4. agreed procedures for multi-disciplinary assessment ;
5. an exploration of ways of better use of services and other resources ;
6. regular meetings of senior managers to develop an overall strategic plan for assessing and meeting children's needs ;

7. a review of provision to ensure that there is equity of resource and access to provision throughout the authority ;
8. an increase of community work in order to reduce the negative stereotypes towards the social work services ; and
9. the establishment of joint training courses (the above objectives are further discussed in the remainder of this section).

Integration of early years services and/or establishment of child development centres

One way of minimising conflict between education and social work staff regarding the scarcity of material resources and for providing a ‘seamless service’ to children and their families is to integrate under 5 services under the control of the education departments (see chapter 5 for arguments offered by managerial staff for the integration of pre-five services in authority B). Another way of encouraging closer working relationships, improving service provision and ensuring the early identification of children who may have special educational needs is to establish multi-disciplinary assessment centres where staff from education, health and social work departments work in the same building and are employed by the same organisation (this recommendation was mentioned by the majority of those who were interviewed).

Establishment of multi-disciplinary meetings of general discussion

The communication procedures adopted by the authorities in this study were neither designed for nor conducive to the negotiation of conflict. Occasionally, participants

acknowledged that, in retrospect, collaboration over a particular child would have been improved if differences in professional perspectives had been aired, but this was rarely attempted due to the lack of general discussion at multi-disciplinary meetings (see sub-section 'communication and relationship issues' in section A of chapter 7). It is important here to mention that such meetings have been, and still are, successfully operated in the area of child protection. It seems likely that the introduction of such meetings in the special educational needs field could be equally successful .

Implications for education

As noted in chapter 4, the postal survey analysis indicated that most authorities' future plans included the establishment of joint training initiatives on inter-agency collaboration and the role of education, health and social work professionals in the assessment of children's special educational needs.

Practitioners need to learn the advantages of inter-professional and inter-agency collaboration in order to be motivated to overcome some of the existing practical and attitudinal barriers. Professionals also need to acquire some specific skills such as partnership, negotiation, networking, communicating, reframing, and evaluation in order to be able to identify shared interests, make clear statements of agreed goals, share or allocate specific tasks and formulate desired outcomes. Moreover, training should help professionals to adopt attitudes and attributes that facilitate inter-professional and inter-agency collaboration such as openness, flexibility, objectivity, vision, credibility,

patience and willingness to learn (these recommendations were mentioned by the majority of professionals who were interviewed).

Training is an area which spans both organisations and both professions and must be sanctioned and financed at various levels by both of them. Although training is designed to promote change in the individual worker, its cumulative effect is upon the profession as a whole. Professional training not only teaches knowledge and skills but also inculcates attitudes and shapes the culture of the professional group in question. By so doing it also creates a sense of identity with the group which by definition is exclusive to others. Devising a training programme that will bring different groups of professionals closely together is not an easy task. If participants are trained to be more similar this will conflict with the acculturation inherent in professional training. Rather than attempt to eliminate differences, it may be more useful to provide training for the recognition of differences, the respecting of such differences and the valuing of their resolution in the interest of higher goals. A radical shift in the focus of professional training is required so that the traditionally exclusive concentration on the profession's own role is seen in an inter-disciplinary framework. Such a training programme should include work on systems theory in order that professionals are able to see themselves first as members of a network of client welfare services and second as specialists within that network. This would not undermine the identity of the different professional groups but would create the inter-dependence which is a basic condition for negotiation. Such a change in the general focus of training would promote the resolution of several of the barriers to co-operation identified in this study, e.g. boundary issues, respect for others, and

confidentiality, because the starting point would be that each group has a distinct but important role to play. The suggested framework for training provides a solid basis on which to build collaborative practice but does not deal with the conflicts which arise from differences in modes of working, perspectives and priorities. It is important for professionals to recognise the extent of their ignorance about other professionals' goals, tasks and financial constraints and obtain the knowledge to overcome it. This will enable them to understand why other professionals and agencies think and behave differently and conceptualise what they might do with regard to a particular case (these recommendations were mentioned by managerial staff in the education and social work departments).

In summary, joint training courses concerning inter-professional and inter-agency collaboration in assessing children's needs should be supported by a theoretical understanding of groups, systems theory and professionalism and an ability to effect the skills of team development. Moreover, attitudes and behaviour of individuals can not change unless changes in legislation, policy and organisational structure take place simultaneously.

Implications for further research

Deriving from experience of this study, three possible inter-related fruitful lines of enquiry present themselves.

As explained in the methodology chapter (chapter 3) the time-scale and financial constraints of this study did not make it possible to cover both assessment and recording

processes or a wider age spectrum (children up to the age of 16). In addition, they did not allow for carrying out interviews with the full range of professionals involved in the assessment of children's special educational needs. Interviews with **all** the professionals involved in **both** the assessment and recording processes for children up to the age of 16 would therefore cast interesting light on the dynamics of inter-professional and inter-agency collaboration. Such a study would also allow for further investigation of the factors that influence inter-professional and inter-agency collaboration and, thus, in turn, for further recommendations for improving such collaborative relationships. It would be ideal if such research could be carried out in three years' time in order to investigate the impact of the Children (Scotland) Act 1995, and, in particular, to determine whether this mandate has increased the frequency of inter-agency collaboration and whether joint assessments are taking place.

Summary

In trying to explore why the research evidence indicates that inter-agency collaboration in the assessment of childrens' special educational needs is limited in extent and poor in quality, the study included an exploration of factors that influence such interactions. This chapter showed that the operation of inter-professional and inter-agency collaboration in the field of special educational needs is dependent on the interplay of a number of internal and external factors.

Cuts in expenditure have inevitably affected the resourcing of welfare agencies and, thus, the material and human resources available to education and social work departments.

This encouraged each agency to pursue the resources of the other and this situation has inevitably led to conflicts between them. The inadequate number of practitioners has also meant that they did not have sufficient time to engage in and maintain collaborative activities. Another external inhibiting factor was found to be the implementation of different and sometimes conflicting policies.

Inter-agency relations were equally affected by a large number of intra-organisational inhibiting factors such as differences in administrative procedures, modes of working and priorities, a lack of any relevant joint training, blurred and unclear roles, confidentiality, struggle for professional dominance and instability of staff. The striking and suprising finding in this study then, is not that inter-agency collaboration in the special educational needs field continues to be limited in extent and poor in quality but that some examples of good collaboration were identified in the study. This confirms the responses given by many participants that, all in all, there is good will on the ground and what is needed is to review, restructure and intensify the existing collaborative arrangements.

Suggestions for changes in policy, practice, education and research have been put forward and a warning given that, although rapid and radical changes can have a catastrophic result, gradual, well-planned simultaneous changes in the external and internal forces can improve and intensify existing inter-agency relations.

CHAPTER 10

CHAPTER 10

CONCLUSIONS

Have the aims of the study been addressed ?

The first stage of the research aimed to describe the existing patterns of collaboration between education and social work authorities in Scotland and some interesting similarities and differences in the nature, quality and extent of collaboration in the assessment of children's special educational needs were identified.

A large number of education and social work departments had established procedures for inter-agency collaboration in assessing children's special educational needs before the passage of the Children (Scotland) Act 1995. Those authorities which had not done so before, did so shortly after the legislation was enacted. Moreover, almost all education and social work departments planned to introduce further changes in policy and/or practice in response to the Act.

There was more frequent collaboration between education and social work staff for pre-school children than for older children since social work departments offered placements for this age group and educational psychologists worked closely with the placement staff. Statistically significant differences in the responses of the education and social work departments concerning the criteria for collaboration were identified. Although there was a consensus as to the two most important criteria, for social work departments the 'severity of disability' came first and the 'complex nature of family situation' came

second whereas in the education authorities it was the other way round. The most likely reason for this difference is that education department staff feel the need to collaborate with social work staff in particularly complex situations, (e.g. where a parent is suffering from depression or some other psychiatric problem or in cases of drug abuse, intra-familial child abuse or violence), because social work staff have the knowledge and experience to deal with these problems. Conversely, social work staff feel the need to collaborate with education department staff, and particularly with educational psychologists, when dealing with children with mild/severe learning difficulties, (e.g. Downs syndrome or cerebral palsy), because they regard educational psychologists as experts in that field. The most common type of special educational needs that resulted in collaboration between the two departments referred to children with complex/profound difficulties.

The postal survey showed that the majority of the education authorities had formal collaborative arrangements for the assessment of children with special educational needs. However, this finding must be treated with caution since the frequency of such multi-disciplinary meetings and the range of types of special educational needs they covered were not specified. It was found to be common practice for parents, co-ordinators, representatives from the social work department and representatives from the health department to participate at these meetings whereas representatives from voluntary organisations seldom did so. Although both education and social work departments seemed to value inter-agency collaboration, analysis revealed that there was a statistically significant difference in their responses with social work staff attaching greater

importance to inter-agency collaboration than education staff. Although a higher proportion of social work respondents seemed to be dissatisfied with the existing patterns of collaboration, this difference was not statistically significant.

The second, and main stage of the research, aimed to explore the similarities and differences among three case study authorities in relation to their patterns of collaboration, and the frequency and quality of collaborative relationships.

The research revealed a number of interesting similarities and differences in the services offered by these authorities and showed how service provision affected the collaborative arrangements between education and social work departments.

While authority B had recently transferred all its under 5 services to the education department, authorities A and C had no plans to do so. In addition, while the social work services in authorities A and C consisted only of family centres, there was a wide range of early years services in authority B (one children's centre, six day nurseries and two family centres). Lastly, while there were both mainstream and special educational provision placements in authorities A and B, only mainstream nurseries existed in authority C.

Authority A had formal collaborative arrangements only, Authority B had both formal and informal collaborative arrangements while Authority C had informal arrangements only. Differences in patterns of collaboration were found to be related to historical factors, the size and location of the authorities, and to the level of resources available in the authority.

In authority A it was uncommon for social workers to collaborate with educational psychologists in assessing children's special educational needs. In fact, social workers in children and families teams collaborated with educational psychologists only in special circumstances, such as child protection cases, children on supervision orders and families who were receiving respite care. However, there was frequent collaboration between day-care staff and educational psychologists. In addition, the day-care staff occasionally collaborated with nursery teachers in nursery schools and classes when the children moved from social work day-care services to nursery schools or classes or when the children had a shared placement.

In contrast to authority A, there was a history of close collaboration between education and social work staff in authority B and it was common for both social workers and day-care staff to collaborate with educational psychologists. Day-care staff also collaborated often with nursery teachers in nursery schools and classes for the same reasons as in authority A. The transfer of all social work under 5 services to the education department in authority B implies less multi-agency collaboration since day-care staff are now employed by the education department and are no longer considered to be social work staff.

In authority C there was no collaboration between day-care staff and educational psychologists because, as explained in chapter 5, the social work department offered placements for pre-school children for only a few hours a week. As far as collaboration is concerned, although educational psychologists collaborated very rarely with social workers in the children and families teams, they did collaborate more often with social

workers in the children affected by disabilities team. The lack of formal multidisciplinary meetings for children with special needs in authority C was related to the fact that the authority was sparsely populated and geographically dispersed. Authorities serving small populations tend to have a limited number of services and staff, professionals know each other, and they often feel that there is no need to formalise their procedures. But even if the professionals wished to do so (which, as explained in chapter 6, they actually did in authority C), the fact that the authority was geographically dispersed and had limited resources made it very difficult to establish formal collaborative arrangements since this would have involved the provision of transport to parents who did not have a car and would have not been able to attend the meetings otherwise.

The study also aimed to evaluate the different collaborative arrangements. There was a consensus among respondents in the three case-study authorities that having only informal arrangements is not very effective and that the best strategy is to have a combination of both types. More specifically in authority C it was found that although there were close links between the educational psychologists and social workers in the children affected by disabilities team, both sides felt that the informal arrangements were not very effective and were planning to formalise their structures.

In addition, the study aimed to investigate of the main issues involved in the assessment of special educational needs and in the decision-making processes. The study revealed that, due to pressure of work, it was common practice for educational psychologists to delay the initiation of a formal assessment until the children were of school age.

Although the government has asked authorities to carry out 'needs led' rather than 'resource led' assessments, this was often difficult to achieve due to a lack of resources.

Evidence was also found to support the claim that the assessment and recording of needs are not always objective and humanitarian processes since they can have a number of other functions apart from the stated aim of identifying the child's needs. The following five functions were identified in the study. Assessments can be a means for: explaining or justifying the restriction of access to certain services; demonstrating that the professionals have a more realistic view of the children's abilities, weaknesses and needs than their parents; monitoring the relationship between parents and children; justifying the existence of certain services, institutions or professional roles and demonstrating the competence of a particular professional.

Moreover, the study revealed that decisions about school placements are not based solely on the children's needs and circumstances but are influenced by a number of other factors such as the struggle for professional dominance in the special educational needs field, the discretionary powers of the educational psychologists and their relationship with their different and often conflicting clients (officers, teachers, parents and children).

Lastly, the research aimed to examine the factors that influence such collaborative activities. The study found that a number of inter-related factors, both internal and external, had shaped the collaborative relationships between education and social work staff. Some of the inhibitory factors were internal while others were external. The main intra-organisational factors that influenced inter-professional and inter-agency collaboration were lack of material and human resources and responsibility for different

and sometimes conflicting policies while the main environmental factors were differences in administrative procedures, modes of working and priorities, a lack of any relevant joint training, blurred and unclear roles, confidentiality, struggles for professional dominance and instability of personnel.

Has the integrated theoretical approach used in the study been useful?

Although the integrated theoretical approach which combines the three main models of inter-agency collaboration has previously been adopted in a child protection study (Hallett and Birchall, 1992), to my knowledge, this is the first time that it has been used in the special educational needs field. Moreover, it is the first time that it has been used together with Davidson's (1976) exploration of internal and external factors and Hudson's (1987) comparative approach to generate a framework for analysing inter-agency relationships. This new approach turned out to be very useful as it made it possible to understand the complexity of inter-agency relationships and the reasons why collaboration was limited in extent and poor in quality.

Inter-agency collaboration between education and social work staff, in assessing children's special educational needs, reflected characteristics of both the exchange model (collaboration was, until recently, internal and voluntary, and resulted in mutual benefits and, thus, interdependence), the resource dependency model (each department pursued the resources of the other department) and the political economy model (that collaboration had recently been imposed by legislation and was, thus, external and involuntary).

However, differences in the extent and relevance of each of these theoretical models to the three case study authorities were identified, particularly with regard to the resource/dependency model. As authority B had recently transferred its under 5 services to the education department, the main principle of the resource/dependency model (agencies survival depends on the acquisition of scarce resources at the expense of other organisations) was no longer applicable to that authority. Similarly, as authority C does not offer services to pre-school children, the above mentioned principle is not applicable in authority C. However, some of the other characteristics of the resource/dependency model were evident in all case study authorities. More specifically, the study revealed that, on several occasions, education and social work staff disagreed as to the kind and/or extent of resources which should be provided for children with special educational needs with social workers tending to adopt an advocacy role. In addition, one could argue that the political economy model was more relevant in authority C rather than in authorities A and B because of its lack of formal structures and its intention to establish formal collaborative arrangements in response to the Children (Scotland) Act 1995.

The symmetry or equality of the exchange relationships was difficult to assess due to its numerous dimensions. The study revealed that social work staff had more power over the richness of the information they could share, whereas educational psychologists had more power both in deciding on school placements for children with special educational needs and whether or not to collaborate.

In addition, the study revealed that collaborative relationships between education and social work staff are influenced by the interplay of a number of environmental and intra-

organisational factors. This finding is of great importance because it suggests that, only if changes in the internal and external conditions take place simultaneously is there a chance of improving the existing collaborative relationships between education and social work staff in assessing special educational needs.

Minimal collaboration was achieved through the employment of two kinds of adjustments: avoidance (educational psychologists collaborated with social work staff only when this was absolutely necessary) and substitution (educational psychologists tried to obtain the information they needed themselves).

What is the overall conclusion ?

Despite the numerous policies that advocate inter-agency collaboration between education and social work authorities and the good will of both managerial staff and practitioners, all in all, collaborative relations continue to be limited in extent and poor in quality. Although examples of effective collaboration were identified in the study, these examples are set within a wider context of independent agencies pursuing their own priorities with often limited regard for the priorities and constraints of the education and social work authorities.

Exploration of the factors that influence such collaborative activities showed that the operation of inter-professional and inter-agency collaboration in the special educational needs field is dependent on the interplay of a number of environmental and intra-organisational factors. Three main inhibitory factors were identified, namely structural differences, lack of joint training and scarcity of human and material resources.

The main internal/intra-organisational inhibitory factors were related to structural differences and lack of joint training. Education and social work departments embody different statutory responsibilities, definitions/terminology, priorities, perspectives, services and other resources and, although joint training could offer an opportunity to address these issues, little effort has been made so far towards joint training initiatives.

Social work staff refer constantly to the Social Work (Scotland) Act 1968 and to the Children (Scotland) Act 1995 as their governing framework, rather than to any Education Acts. Many social workers are unfamiliar with the detail of the Education Acts and other education policy documents that refer to the assessment and record of needs processes and education policies have, therefore, little impact on the world of social work. In addition, social worker's attention is focused on child protection cases and only a small proportion of the children they work deals with children with special educational needs. Given these different legislative frameworks, it is not altogether surprising that most social work departments do not have designated special educational needs officers, or that some social work departments lack clear structures for responding to special educational needs issues (see the account in chapter 6 of collaborative arrangements in authority C). In the absence of these structures, such responses are greatly dependent on the energy and commitment of individual staff in various parts of the system .

Structural differences were also related to differences in the perspective adopted by education and social work staff. Although some education and social respondents in the three case study authorities reported that they had similar perspectives and, more specifically, that they both adopted the social model in their daily practice, several social

workers thought that educational psychologists still used the medical/individual model since they often focused on the child and neglected societal factors that influenced the child's life. However, several educational psychologists explained that, although they would have liked to work closely with other professionals, children with special educational needs and their parents, their workloads often restricted them to the 'gathering' of the assessment reports of the professionals involved in the case, and that they had limited personal involvement with children and their parents.

The reason for lack of joint training is indirectly related to the second inhibitory factor, that of scarcity of material and human resources. Scarcity of material resources implies that there are insufficient funds for staff development/training initiatives and this has led each agency to pursue the resources of the other leading, inevitably, to conflicts between them. The inadequate number of personnel has also meant that practitioners did not have sufficient time to engage in and maintain collaborative activities. Collaboration with other agencies is thus something which is 'added on' to the core activities of the agency. What seems to be essential for effective inter-agency collaboration, therefore, is an organisational acknowledgement that collaborative activities are not something 'added on' to the agency's core concerns, but are at the very heart of those concerns. In other words, there needs to be an acceptance at both operational and strategic level in the agencies involved (in this case practitioners and senior managers in the education and social work departments) that, given that any individual agency is unlikely to have the resources, expertise or facilities to provide for children in need on its own, the integration of services, where possible, represents the most rational means of delivering effective

action to meet escalating demands. It is argued that the latter task can be carried out through the vehicle of joint training. As suggested in chapter 9, its basis should be shifted from initial socialisation into a strong professional identity which involves the devaluing of other professions, to socialisation into an integrated welfare identity shared by all welfare professionals. Such training would incorporate education in group dynamics, systems theory and the skills of negotiation and networking.

It is also argued that effective inter-professional and inter-agency collaboration calls for a careful and systematic review and evaluation of local practices undertaken by agencies separately and in partnership with each other. It is suggested that the analytic framework used in this study could provide professionals and managers with a powerful tool to assist them in the reviewing and evaluating process.

Lastly, and perhaps most importantly, effective inter-professional and inter-agency collaboration calls for the injection of new resources which would enable joint training to take place and, in turn, lead to network awareness and to the acquisition of a welfare identity (professionals would see themselves as members of a network of welfare services) and would also encourage the recruitment of education and social work staff who would invest more time collaborative activities. Injection of additional resources would also lead to expansion of existing placements which could minimise conflicts between education and social work staff and provide a clear message to the statutory agencies that the government is committed to this objective and that the necessary time, resources and effort are being devoted it.

In concluding, it can be said that, although changes in environmental and intra-organisational conditions are difficult to achieve, this should not be viewed as a problem by policy-makers, managers and practitioners, but instead, as a great challenge because, if carried out successfully, it will produce benefits not only for children with special educational needs and their families but for all the parties concerned.

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APPENDICES

APPENDIX 1 : CHAPTER 1

APPENDIX A.1. : The nine steps in identifying and assessing a child's special educational needs in the pre-school period

- STEP 1** Referral: The child is referred to educational services by parents or, with their consent, by a medical officer or other professional involved.
- STEP 2** Dissemination of information: Parents are informed about services available and are invited to have their child assessed, usually by an educational psychologist in the initial stage.
- STEP 3** Initial assessment: An educational psychologist visits the home or educational setting to meet child and parent, to provide basic information, to answer questions and, perhaps, to conduct initial assessment to determine which other members of the educational service should be involved. At this point other professionals are formally informed about the involvement of educational services and arrangements are made for collaboration.
- STEP 4** Completion of first round of assessment: All members of educational services conduct their assessment, co-ordinated where possible with that of other departments. Reports are prepared and findings discussed with parents. (Parents and professionals may agree that the child does not have special educational needs and that no exceptional measures are required.)
- STEP 5** Profile of needs and decisions about recommended provisions: An initial profile of the child's development and needs is drawn up. Parents are informed about the range of provision available and decisions are taken about the forms of provision recommended and whether, if the child is aged two or over, a Record of Needs should be opened. (Some children and families will withdraw at this stage if the child does not have special educational needs.)
- STEP 6** Provision is made and, where appropriate, a Record of Needs opened: The education authority offers provision. Concurrently or before this action, perhaps at Step 5, where a Record of Needs is to be opened, the Director of Education sends the parents a letter inviting them to have their child examined by a medical officer and assessed by an educational psychologist. As a result of advice from the assessment team, a draft Record of Needs is prepared in consultation with the parents. At this point the parents state whether they wish a Named Person – a person agreeing to act as adviser and friend. The Record is opened and a copy is sent to the parents, to the psychological service and to the nursery unit or school attended. Provision is made as recommended on the Record of Needs by members of the multi-disciplinary team. In instances when parents do not agree with the terms of the Record or the decision to open a Record, they may follow appeals procedures laid down in the Education (Scotland) Act, 1980.
- STEP 7** Review of progress: Where the child is receiving specialist services on a continuing basis, progress is closely monitored and reported to the parents. The progress of children is generally reviewed and, if necessary, reassessed at intervals of around one year.
- STEP 8** Preparation for school: About one year prior to formal admission to school, or earlier if requested by the parents, the child's development and progress are assessed by members of his or her multi-professional team. The implications of the child's special educational needs for school provision are considered and options are explained to his or her family, who may take up offers to visit the schools suggested and may suggest others. As a result of the assessments and discussions a meeting is held with the parents, staff in any existing provision and staff in the optional schools. This may be the step at which a Record of Needs is opened for some children. Once decisions have been taken about the school and the support to be provided, the child is assisted to make the transition. If a Record of Needs has been opened, its terms are amended in line with the recommendations, and the parents' approval sought.
- STEP 9** Post-placement assessment: About 3-6 months after placement the child's progress is reviewed and the effectiveness of support systems is evaluated. Adjustments are made in line with recommendations. It is often at this stage that the professionals with pre-school remit withdraw and hand over responsibilities to colleagues.

APPENDIX 1.2 : The eight steps in identifying and assessing pupils' special educational needs at the primary stage

- STEP 1** Identification of difficulties in learning: Through the procedures normally used in the classroom, the class teacher assesses individuals' learning difficulties. Where relevant, reference is made to pre-school reports and to information given by parents. The teacher takes action to overcome the learning difficulties within a defined period, generally by adjusting the class programme. The teacher reassesses, making a record of the problems faced by individuals, and their learning strengths.
- STEP 2** Referral to learning support co-ordinator: The class teacher consults with the learning support co-ordinator and together they plan, record and implement courses of action for those pupils who have continuing difficulties. Parents are informed and consulted. Additional assistance may be given to the individual by promoted staff, another teacher, or the learning support specialist attached to or on the staff of the school. Arrangements are made to review progress. At this point, the school has set up learning support arrangements which assist the majority of the pupils with special educational needs to make progress. Their progress and the nature of provision are monitored and necessary adjustments are made.
- STEP 3** Referral to support services outwith the school: Where a pupil's special educational needs are not being met within the resources of the school, the learning support co-ordinator and class teacher consult with the headteacher. Where it is decided that further assistance is required, the headteacher may first seek advice from an adviser or learning support specialist from outwith the school. The next step is to seek parents' permission to refer the child to the psychological service. In good practice referral is in writing and specifies (a) the individual's strengths, and any needs which have been identified; (b) the parents' views; (c) actions taken by the school; and (d) indications of the assistance required.
- STEP 4** Consideration of the pupil's needs by the educational psychologist: The educational psychologist meets the parents and assesses the pupil in the school and in other contexts as required. A course of action is recommended in writing with, where appropriate, advice on the content of the curriculum and learning and teaching strategies. Other members of support services may also assess the pupil at this stage and make recommendations. Where action is some form of educational programme, arrangements are made for review and evaluation, in consultation with parents and school staff. No further steps are required for many pupils but the support services and school, in consultation with parents, continue the process of monitoring progress and adjusting provision in line with needs.
- STEP 5** Consideration is given to opening a Record of Needs: The headteacher, parents and, normally, the educational psychologist consider whether a Record of Needs should be opened. If there is agreement, the directorate is informed and statutory procedures are initiated. School staff prepare a report on their view of the child's strengths and needs.
- STEP 6** Medical examination and psychological assessment: The child is assessed. Parents have the right to be present at the medical examination and should be invited to discussions with the educational psychologist. The medical officer and the psychologist prepare reports. Staff in school, meantime, continue to give the pupil assistance.
- STEP 7** Meeting to discuss opening of Record of Needs: The professionals, including representatives of school staff, meet with parents to discuss assessments. If the decision is that a Record of Needs should be opened, then the pupil's special educational needs are defined and the provision required to meet these needs is specified. Learning and teaching targets should be set and the date of the review agreed. The drafted terms are sent to the directorate for consideration and action. School staff prepare or update their individualised educational programme for the pupil.
- STEP 8** Opening the Record of Needs: The Record is drafted and a copy is sent to parents for approval. Once approved it is 'opened' and copies are sent to parents, school and psychological service. Parents may appeal against the decisions to open or not to open a Record, against the terms of the Record and against proposed placement.

Source : The Scottish Office, 1994:38

APPENDIX 1.3. : The ten distinctive features of effective provision for special educational needs

1. **Understanding special educational needs:** Those planning and making the provision have thought through, and share an understanding of, the continuum of special educational needs.
2. **Effective identification and assessment procedures:** Effective and efficient procedures for the identification and assessment of the special educational needs of children and young persons are recognised as essential first steps in making good provision for them.
3. **An appropriate curriculum:** The special educational needs of children and young persons are met through provision of an appropriate curriculum.
4. **Forms of provision suited to needs:** Children and young persons are more likely to make good progress through schools, units and colleges which ensure provision most suited to their special educational needs.
5. **Effective approaches to learning and teaching:** Varied and efficient strategies for learning and teaching include specific techniques to meet the special educational needs of children and young persons.
6. **Attainment of educational goals:** Provision ensures that children and young persons have every opportunity to progress and to achieve educational goals in line with their aptitudes and abilities.
7. **Parental involvement:** The rights and responsibilities of parents are respected and they are actively encouraged to be involved in making decisions about the approaches taken to meet their children's special educational needs.
8. **Interprofessional co-operation:** Teachers enhance their effectiveness by working co-operatively with colleagues in schools and other educational services and, when required, with other professionals from health boards, social work departments and voluntary agencies.
9. **Effective management of provision:** Provision for special educational needs is planned, well managed and regularly reviewed.
10. **Full involvement of child or young person:** The views and aspirations of the individual child or young person with special educational needs are central in making all forms of provision.

Source : The Scottish Office, 1994:9

APPENDIX 1 : CHAPTER 3

APPENDIX 2.1. : Questionnaire to the education departments

QUESTIONNAIRE TO EDUCATION DEPARTMENT

COLLABORATION BETWEEN EDUCATION AND SOCIAL WORK AUTHORITIES IN ASSESSING CHILDREN UP TO THE AGE OF 16 WITH SPECIAL EDUCATIONAL NEEDS

Name of the Local Authority

Name of Respondent

Post of Respondent

What are your professional responsibilities in relation to the assessment of children up to the age of 14 with special educational needs ?

1) Did your department have established procedures for inter-professional and inter-organisational collaboration in assessing the special educational needs of children up to the age of 16, before the publication of the Children (Scotland) Act 1995 ?

Yes ☐

No ☐

I do not know ☐

If YES, please describe them briefly and then go to question 3

2) Has your department introduced any changes in policy and/or practice in response to the new legislative framework for inter-professional collaboration in assessing the special educational needs of children up to the age of 16, as set out in the Children(Scotland) Act 1995 ?

Yes ☐

No ☐

I do not know ☐

Please turn over

If YES, what are these changes ?

If NO, specify the reasons for this .

3) Does your department plan to introduce any changes in policy and/or practice in response to the new legislative framework for inter-professional collaboration in assessing the special educational needs of children up to the age of 16, as set out in the Children(Scotland) Act 1995 ?

Yes ☐

No ☐

I do not know ☐

If YES, what are these changes ?

If NO, specify the reasons for this .

Please turn over

4)When your department makes an assessment of the special educational needs of children up to the age of 16, do you collaborate with social work staff ?

(PLEASE TICK ONLY ONE BOX)

	Children under 5 years old	Children between 5-16 years old
Always	<input type="checkbox"/>	<input type="checkbox"/>
Usually	<input type="checkbox"/>	<input type="checkbox"/>
Seldom	<input type="checkbox"/>	<input type="checkbox"/>
Never	<input type="checkbox"/>	<input type="checkbox"/>

5) What are the most important criteria used in deciding whether to collaborate with social work staff in assessing the special educational needs of children up to the age of 16 ?

(RANK IN ORDER OF IMPORTANCE BY USING 1 FOR THE MOST IMPORTANT CRITERION)

Severity of disability	<input type="checkbox"/>
Complex nature of family situation	<input type="checkbox"/>
Sharing of resources	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>

6) Which of the following types of special educational needs most often result in contact with social work staff for assessing children up the age of 16 with special educational needs ?

(TICK THE APPROPRIATE BOXES)

	Children under 5 years old	Children between 5-16 years old
Physical/sensory disability (motor, hearing, visual)	<input type="checkbox"/>	<input type="checkbox"/>
Emotional and behavioural difficulties	<input type="checkbox"/>	<input type="checkbox"/>
Mild/moderate learning difficulties	<input type="checkbox"/>	<input type="checkbox"/>
Severe learning difficulties	<input type="checkbox"/>	<input type="checkbox"/>
Complex difficulties	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>

7) Please indicate with which social work staff you usually collaborate in assessing children up the age of 16 with special educational needs ?

(PLEASE TICK ONE BOX FOR EACH GROUP OF STAFF)

Administrative Staff	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Service Managers	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Social Work Staff: In Community Teams	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
In Hospital	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
In Day Care	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
In Residential Care	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Other (please specify)		<input type="checkbox"/>		<input type="checkbox"/>

8) Does your department use multi-disciplinary Teams (MDTs) for assessing the special educational needs of children up to the age of 16 ?

Yes ☐

No ☐

I do not know ☐

IF NO, turn to question 10

9) Which of the following people attend MDTs ?

(PLEASE TICK ONE BOX FOR EACH GROUP OF PEOPLE)

	Always	Usually	Seldom	Never
Parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Co-ordinator of the MDT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Representative from education department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Representative from social work department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Representative from health department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Representative from a voluntary organisation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10) How important do you believe the collaboration between education and social work staff to be in assessing children up to the age of 16 with special educational needs ?

Very important ☐

Important ☐

Not so important ☐

Of no importance ☐

11) How satisfied are you with the patterns of collaboration between the Education Department and the Social Work Department with reference to the assessment of children up to the age of 16 with special educational needs ?

Fully satisfied ☐

Satisfied ☐

Unsatisfied ☐

Very unsatisfied ☐

12) Is there anything you would like to add?

Thank you for taking time to fill in this questionnaire

APPENDIX 2.1. : Questionnaire to the social work departments

QUESTIONNAIRE TO SOCIAL WORK DEPARTMENT

**COLLABORATION BETWEEN EDUCATION AND SOCIAL WORK AUTHORITIES IN
ASSESSING CHILDREN UP TO THE AGE OF 16 WITH SPECIAL EDUCATIONAL NEEDS**

Name of the Local Authority :

Name of Respondent :

Post of Respondent :

What are your professional responsibilities in relation to the assessment of children up to the age of 16 with special educational needs ?

- 1) Did your department have established procedures for inter-professional and inter-organisational collaboration in assessing the special educational needs of children up to the age of 16, before the publication of the Children (Scotland) Act 1995 ?

Yes ☐

No ☐

I do not know ☐

If YES, please describe them briefly and then go to question 3

2) Has your department introduced any changes in policy and/or practice in response to the new legislative framework for inter-professional collaboration in assessing the special educational needs of children up to the age of 16, as set out in the Children(Scotland) Act 1995 ?

Yes ☐

No ☐

I do not know ☐

If YES, what are these changes ?

If NO, specify the reasons for this .

3) Does your department plan to introduce any changes in policy and/or practice in response to the new legislative framework for inter-professional collaboration in assessing the special educational needs of children up to the age of 16, as set out in the Children(Scotland) Act 1995 ?

Yes ☐

No ☐

I do not know ☐

If YES, what are these changes ?

If NO, specify the reasons for this .

Please turn over

- 4) What are the most important criteria used in deciding whether to collaborate with education department staff in assessing the special educational needs of children up to the age of 16 ?

(RANK IN ORDER OF IMPORTANCE BY USING 1 FOR THE MOST IMPORTANT CRITERION)

Severity of disability	<input type="checkbox"/>
Complex nature of family situation	<input type="checkbox"/>
Sharing of resources	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>

- 5) Which of the following types of special educational needs most often result in contact with education department staff for assessing children up the age of 16 with special educational needs?

(TICK THE APPROPRIATE BOXES)

	Children under 5 years old	Children between 5-16 years old
Physical/sensory disability (motor, hearing, visual)	<input type="checkbox"/>	<input type="checkbox"/>
Emotional and behavioural difficulties	<input type="checkbox"/>	<input type="checkbox"/>
Mild/moderate learning difficulties	<input type="checkbox"/>	<input type="checkbox"/>
Severe learning difficulties	<input type="checkbox"/>	<input type="checkbox"/>
Complex difficulties	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>

- 6) Please indicate with which education department staff you usually collaborate in assessing children up to the age of 16 with special educational needs ?

(PLEASE TICK ONE BOX FOR EACH GROUP OF STAFF)

	Yes	No
Administrative staff	<input type="checkbox"/>	<input type="checkbox"/>
Educational psychology staff	<input type="checkbox"/>	<input type="checkbox"/>
Advisory staff	<input type="checkbox"/>	<input type="checkbox"/>
Education welfare staff	<input type="checkbox"/>	<input type="checkbox"/>
Staff in nursery schools/units (children under 5s)	<input type="checkbox"/>	<input type="checkbox"/>
Staff in schools/units (children 5-13): Teachers, Head teachers	<input type="checkbox"/>	<input type="checkbox"/>
Other (Please specify)	<input type="checkbox"/>	<input type="checkbox"/>

- 7) Does your authority use Multi-disciplinary Teams (MDTs) for assessing the special educational needs of children up to the age of 16 year old ?

Yes ☐

No ☐

I do not know ☐

If NO, turn to question 10

Please turn over

8) Which of the following people attend MDTs ?

(PLEASE TICK ONE BOX FOR EACH GROUP OF PEOPLE)

	Always	Usually	Seldom	Never
Parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Co-ordinator of the MDT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Representative from education department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Representative from social work department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Representative from health department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Representative from a voluntary organisation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9) How important do you believe the collaboration between education and social work staff to be in assessing children up to the age of 16 with special educational needs ?

Very important ☐ Important ☐ Not so important ☐ Of no importance ☐

10) How satisfied are you with the patterns of collaboration between the Education Department and the Social Work Department with reference to the assessment of children up to the age of 16 with special educational needs ?

Fully satisfied ☐ Satisfied ☐ Unsatisfied ☐ Very unsatisfied ☐

11) Is there anything you would like to add?

Thank you for taking time to fill in this questionnaire

APPENDIX 2.2. : Letter to the Association of the Directors of education in Scotland

Dear

**RE: RESEARCH PROJECT ON COLLABORATION BETWEEN EDUCATION AND SOCIAL
WORK AUTHORITIES CONCERNING THE ASSESSMENT AND RECORDING OF CHILDREN
UP TO THE AGE OF 11 WITH SPECIAL EDUCATIONAL NEEDS**

I am a PhD student in the Department of Social Policy and Social Work at Edinburgh University. I am writing to you as a secretary of the Association of Directors of Education in Scotland in order to request access to the Departments of Education.

I enclose, as requested, a draft letter that would be sent to the Directors of Education (and to the Directors of Social Work), a draft of the questionnaires which would accompany the letter, and some information on the design methodology and timetable of the study. I hope that this information is sufficient to enable you to give permission in principle for this proposed research study to proceed. If there is any further information you need to assist the committee to make its decision, please let me know.

I would be happy to consider any suggestions your committee may wish to make about the questionnaires or the general research design.

I look forward to hearing from you.

Yours sincerely
Nadia Farmakopoulou
Post-graduate research student

APPENDIX 2.2. : Letter to the Association of the Directors of social work in Scotland

Dear

**RE: RESEARCH PROJECT ON COLLABORATION BETWEEN EDUCATION AND SOCIAL
WORK AUTHORITIES CONCERNING THE ASSESSMENT AND RECORDING OF CHILDREN
UP TO THE AGE OF 11 WITH SPECIAL EDUCATIONAL NEEDS**

I am a Ph.D. student in the Department of Social Policy and Social Work at Edinburgh University. I am writing to you as a Convenor of the Standard Training and Research Committee of the Association of Directors of Social Work in Scotland in order request access to the Departments of Social Work.

I enclose, as requested, a draft letter that would be sent to the Directors of Social Work (and to the Directors of Education), a draft of the questionnaires which would accompany the letter, and some information on the design methodology and timetable of the study. I hope that this information is sufficient to enable you to give permission in principle for this proposed research study to proceed. If there is any further information you need to assist the committee to make its decision, please let me know.

I would be happy to consider any suggestions your committee may wish to make about the questionnaires or the general research design.

I look forward to hearing from you.

Yours sincerely
Nadia Farmakopoulou
Post-graduate research student

**APPENDIX 2.3. : Covering letter to the Directors of all the education and social
work departments in Scotland**

Dear

**RE: RESEARCH PROJECT ON COLLABORATION BETWEEN EDUCATION AND SOCIAL
WORK AUTHORITIES CONCERNING THE ASSESSMENT OF CHILDREN UP TO THE AGE OF
11 WITH SPECIAL EDUCATIONAL NEEDS**

I am carrying out research for a Ph.D. at Edinburgh University on inter-professional and inter-organisational collaboration between social work and education department staff in the assessment of children up to the age of 16 with special educational needs. In order to obtain a national picture, I intend to carry out a postal survey of all local authority Education and Social Work Departments in Scotland. With the approval of the Association of Directors of Education in Scotland (ADES) and the Association of Directors of Social Work (ADSW), I am sending you a copy of the relevant questionnaire and would be most grateful if you could arrange for someone who is involved in policy implementation to complete the questionnaire on behalf of your department and return it to me at the above address. On the basis of the responses I receive, I intend to approach a small number of local authorities and seek their co-operation in carrying out more in-depth research.

As I am aware that the staff of your department are under great pressure, I have constructed a short questionnaire, which I have piloted and believe will take no more than 15 minutes to complete. I will, in turn, undertake to inform you of the results of this survey and assure you that the information provided will be presented anonymously.

I am keen to complete the first stage of my research as quickly as possible. I would therefore appreciate a response at your earliest convenience and if at all possible no later than 1st October 1997.

If you have any queries, please do not hesitate to contact me or my supervisors :

Prof. Michael Adler : Social Policy Department TEL: 0131 650 3931

Mr. Ralph Davidson : Social Work Department TEL: 0131 650 3905

Thank you in advance for your co-operation

Yours sincerely

Nadia Farmakopoulou

Postgraduate Research Student

TEL : (0131) 650 3921

APPENDIX 2.4. : Letter to the Directors of the selected case-study authorities

Dear

I am writing first, to thank you and/or your colleagues once again for completing the postal survey I sent out the summer and, second, to request your authority's participation in the next stage of my research.

The postal survey revealed a number of interesting similarities and differences in the nature and extent of collaboration in assessing the special educational needs of young children between education and social work departments in Scotland. It has enabled me to select three authorities in which I would like to carry out detailed case studies and, because your authority appears to have a well developed and rather distinctive set of collaborative arrangements, it is one of those I would like to include.

The main aims of the case studies are to investigate why different forms of collaboration have been developed, to assess the advantages and disadvantages of MDTs which are generic for children with special needs, MDTs which are dedicated to children with special educational needs and informal collaborative arrangements for multi-disciplinary assessment and to identify the factors which encourage and inhibit inter-professional and inter-agency collaboration.

To explore these different patterns of collaboration I would like to study the cases of six 3-5 year old children ideally two with MLD, two with SLD and two complex/multiple difficulties, whose needs have either recently been formally assessed or, better still, are about to be assessed. I intend to seek parental consent to consult records, structured interviews with the education and social work staff (both day-care staff and social workers) who are involved in the assessment of these six children and some background interviews with other staff who are involved in policy making or implementation. I would, of course, ensure confidentiality and anonymity in presenting the findings of this research.

I would expect to spend 40-50 days in each authority and I will contact you early in the new year to suggest dates when I can undertake the study. In the meantime, I would appreciate hearing from you if you would be willing to participate in this research. I have written in identical terms to the Director of Social Work and, in the circumstances, I would like to suggest that you reply jointly.

If you need any further information, please do not hesitate to contact me or my supervisors.

Yours sincerely
Ph.D. student
Nadia Farmakopoulou

APPENDIX 2.5. : Summary of the data on the case study children

SUMMARY OF DATA ON CASE STUDY CHILDREN

AREAS	CHILD	NAME	SEX	AGE	TYPE OF SEN	WHO PROVIDED PLACEMENT
AUTH. A	CS1	JAMES	MALE	(4yrs)	POSSIBLE (On-going assessment) MILD LEARNING DIFFICULTIES	SOCIAL WORK BASED (Children's Center)
AUTH. A	CS2	RITCHARD	MALE	(4yrs)	POSSIBLE (On-going assessment) MILD LEARNING DIFFICULTIES	SOCIAL WORK BASED (Children's Center)
AUTH. B	CS3	DEBORAH	FEMALE	(4 1/2yrs)	MILD LEARNING DIFFICULTIES + SEBD	EDUCATION BASED (Mainstream nursery)
AUTH. B	CS4	PETER	MALE	(4 1/2 yrs)	MILD LEARNING DIFFICULTIES + SOCIAL CARE NEEDS	EDUCATION BASED (Mainstream nursery)
AUTH. A	CS5	SARAH	FEMALE	(3 yrs)	SPEECH AND LANGUAGE DIFFICULTIES (Autism)	SOCIAL WORK BASED (Children's Center)
AUTH. A	CS6	DEBBIE	FEMALE	(4 yrs)	SPEECH AND LANGUAGE DIFFICULTIES (Language disorder) + MILD LEARNING DIF.	SOCIAL WORK BASED (Children's Center)
AUTH. B	CS7	COLIN	MALE	(4yrs)	SPEECH AND LANGUAGE DIFFICULTIES (Language disorder)	SOCIAL WORK BASED (Day Nursery)
AUTH. B	CS8	STEWART	MALE	(4yrs)	SPEECH AND LANGUAGE DIFFICULTIES (Autism)	SOCIAL WORK BASED (Children's Center)
AUTH. A	CS9	ZANE	MALE	(4 yrs)	COMPLEX /MULTIPLE DIFFICULTIES (Global devel. delay + Profound hearing impair. + SPEECH AND LANGUAGE DIFFIC.)	VOL. ORG. + EDUC. BASED (Spec. Educ. Provision)
AUTH. A	CS10	TWINS REBBECA & JESSICA	FEMALES	(4 yrs)	COMPLEX /MULTIPLE DIFFICULTIES (Cerebral palsy) Jessica has also MILD LEARNING DIFFICULTIES	VOLUNTARY ORGANISATION (Share the Care)
AUTH. B	CS11	IMRAN	MALE	(4 yrs)	COMPLEX /MULTIPLE DIFFICULTIES (Cerebral palsy) (Severe learn. diffic. + Physical disability + SPEECH AND LANGUAGE DIFFIC.)	SOCIAL WORK BASED (Day Nursery)
AUTH. B	CS12	BILLAL	MALE	(5 yrs)	COMPLEX /MULTIPLE DIFFICULTIES (Cerebral palsy) (Severe learn. diffic. + Physical disability + SPEECH AND LANGUAGE DIFFIC.)	EDUCATION BASED (Spec. Educ. Provision)
AUTH.C	CS13	FIONA	FEMALE	(4 yrs)	COMPLEX /MULTIPLE DIFFICULTIES (Global devel. delay + Visual and Hearing impairment)	EDUCATION BASED (Mainstream nursery with additional support)
AUTH.C	CS14	AZIM	MALE	(4 yrs)	COMPLEX /MULTIPLE DIFFICULTIES (Severe learning difficulties + Visual and Hearing impairment)	EDUCATION BASED (Spec. Educ. Provision)
AUTH.C	CS15	ANDREW	MALE	(4 yrs)	COMPLEX /MULTIPLE DIFFICULTIES (Global devel. delay)	NONE (Waiting for special educational provision in the authority to be ready)
AUTH.C	CS16	CHRISTINE	FEMALE	(3 yrs)	COMPLEX /MULTIPLE DIFFICULTIES (Severe learn. diffic. + Physical disability + Health problems) Spends a lot of time at hospital	EDUCATION BASED (Mainstream nursery) with additional support
AUTH.C	CS17	SHAUN	MALE	(4 yrs)	COMPLEX /MULTIPLE DIFFICULTIES Deteriorating condition, Multiple health problems. Spends a lot of time at hospital	EDUCATION BASED (Mainstream nursery) with additional support
AUTH.C	CS18	CAMERON	MALE	(3 yrs)	COMPLEX /MULTIPLE DIFFICULTIES (Severe learn. diffic. + Physical disability)	NONE (Waiting for special educational provision in the authority to be ready)

APPENDIX 2.6. : Interview design for the semi-structured interviews with education staff : Authorities A and B

The interview design is divided into four sections. Each section includes a short introduction about the topics that will be covered in it.

SECTION A

We will start with your role

What is your role in the assessment of special educational needs of children under 5?

I would now like to understand, from your own perspective the role of the social work staff in the assessment of special educational needs for under 5's, can you please explain to me what his/her role involves?

How clear/unclear do you think the role of the educ. dept. staff to be in the assessment process?

How clear/unclear do you think the role of the social work staff to be in the assessment process?

In your collaboration with social work department staff in the assessment process are there overlaps in your role ?

Probe : If there is an overlap, do you think that this is useful or not ?
Can you give me an example ?

Do you think that you and the social work staff share similar/dissimilar aims and values in handling cases in the assessment process ?

Probe : Can you give me an example ?

If not, do you believe that these differences hinder such collaborative relationship ? **Probe :** Can you give me an example ?

Ask also : How long have you worked together ? **If long time ask:** Has your opinion about the value of such collaborative activity changed since you started working within assessing the special educational needs of under 5's ?

Do you think that now that the collaboration between education and social work staff in assessing the SEN of young children is mandatory (Children (Scotland) Act 1995) that there is greater contact between you and the social work staff ?

What, in your opinion, are the advantages of inter-professional collaboration in the assessment of special educational needs for under 5's?

Probe : How has your department benefited by such collaborative activity?

Probe : What are the benefits for you personally ?

What, in your opinion, are the disadvantages of such inter-professional collaboration ?

Probe : What are the costs of such collaborative activity for your department ?

Probe : What are the costs for you personally ?

Do you think that there are more benefits or costs ?

Probe : Can you explain to me why ?

SECTION B

How would you describe the type of collaborative arrangements between education and social work staff in assessing the special educational needs of under 5's ?

Probe : What is the nature of the collaboration ?

Is it formal or informal ? *By formal collaborative arrangements I mean structured/permanent multi-disciplinary meetings which have a core membership and by informal I refer to non-structured/client multi-disciplinary meetings which do not have a core membership as well as to casual meetings, telephone conversations and correspondence.*

When usually the assessment process is taking place ?

Probe : How old are usually the children when their special educational needs are assessed ?

What are the categories of SEN that result in collaboration between you and education department staff for assessing the child's special educational needs ?

Are you satisfied with the patterns of collaboration between education and social work department with reference to the assessment of under 5's with special educational needs
If no, have you ever considered to change your collaborative patterns ?

If social work staff are involved with a child that is going to be assessed, do you always know this ?

IF yes ask : If social work staff are involved with this child how do you know about this ?

IF no, how do you then find out if social work staff are involved with a child ?

If social work staff are involved with this child do you always ask their help and/or advice?

Can you give me an example of a case where you would definitely ask advice from social work staff ?

Can you now give me an example of a case where you would not ask advice from social work staff although you are aware the he/she knows about the child and/or his/her family ?

Do you have a set number of collaborative activities that you routinely undertake or is it on a case by case basis ?
If yes, what are these activities ?

Do you usually collaborate with managerial staff or with practitioners?

What are the advantages of formal arrangements ?

What are the disadvantages of formal arrangements ?

What are the advantages of informal arrangements ?

What are the disadvantages of informal arrangements ?

Do you think that greater contact would help ? If so, in what way ?

Now we will talk about information-sharing

What kind of information do you usually exchange with social work dept. staff ?

Probe : Do you usually pass on all the information you have about the child and/or his/her family ?

If not, what kind of information would you not pass and why ?

Do you have to ask parent's permission for passing on information or not

From your own experience is there good communication between social work staff and education department staff involved in the MDT's?

Do you use similar/dissimilar jargon and terms ? **If not,** does this hinder inter-professional collaboration ?

Can you describe to me your relationship with social work staff ?

Probe : Is it friendly or unfriendly ?

Probe : Is it equal or unequal ? **If unequal,** why is it so?

Probe: Do you ever have difficulties or disagreements in your collaborative relationship with education dept staff ? **If yes,** What are the most common reasons for disagreements ?

In both cases, Can you give me some examples ?

Ask for good collaborative example and bad collaborative example

If they do not mention resource problem ask : Do you think that there is scarcity of resources ?

If yes ask : Can you give me an example that refers to the scarcity of resources ?

Does the education dept staff admit to you the fact that they do not have the necessary resources ? **Probe:** Are they open to you ?

If you could imagine that you had all the resources you need do you think that you and education dept staff would have an excellent relationship ?

Are you satisfied with the type of relationship between education and social work department staff with reference to the assessment of special educational needs of under 5's ?

IF yes, why ? , IF not, why ?

If you did not work with social work staff what would you miss most ?

Now we will talk about training

How much initial training (if any) provided for inter-agency and inter-professional collaboration ?

IF NOT SKIP QUESTION 22-23 and ask : Do you think that a joint training programme with social work staff about inter-agency and inter-professional collaboration it will be useful?

I would like now to discuss suggestions about improving such collaborative activity

What in your opinion makes for effective inter-professional and inter-agency collaboration ?

What changes in the relationship you have with education department staff would you prefer ?

What strategies might be devised to overcome communication difficulties amongst professionals ? Probe :Are there any other strategies to improve your working relationship ?

**APPENDIX 2.6. : Interview design for the semi-structured interviews with social
work staff : Authorities A and B**

The interview design is divided into four sections. Each section includes a short introduction about the topics that will be covered in it.

We will start with your role

What is your role in the assessment of special educational needs of children under 5 ?

I would now like to understand, from your own perspective, the role of the education dept staff (*ask both for EPs and nursing teachers*) in the assessment of special educational needs for under 5's, can you please explain to me what his/her role involves?

How clear/unclear do you think the role of the education department staff (*ask both for EPs and nursing teachers*) to be in the assessment process?

How clear/unclear do you think the role of the social work staff to be in the assessment process?

In your collaboration with education department staff in the assessment process are there overlaps in your role ?

Probe :If there is an overlap, do you think that this is useful or not ?

What could you do to help that the education dept staff could not ?

Can you give me an example ?

Do you think that you and the education department staff share similar/dissimilar aims and values in handling cases in the assessment process ?

Probe : Can you give me an example ?

If not, do you believe that these differences hinder such collaborative relationship ? Can you give me an example ?

Ask also : Have long have you worked together ? **If long time ask:** Has your opinion about the value of such collaborative activity changed since you started working with education dept staff in assessing the special educational needs of under 5's ?

Do you think that now that the collaboration between education and social work staff in assessing the SEN of young children is mandatory (Children (Scotland) Act 1995) that there is greater contact between you and the education department staff ?

What, in your opinion, are the advantages of inter-professional collaboration in the assessment of special educational needs for under 5's ?

Probe : How has your department benefited by such collaborative activity?

Probe : What are the benefits for you personally ?

What, in your opinion, are the disadvantages of such inter-professional collaboration?

Probe : What are the drawbacks of such collaborative activity for your department ?

Probe : What are the drawbacks for you personally ?

Do you think that there are more benefits or drawbacks ?

Probe : Can you explain to me why ?

SECTION B

How would you describe the type of collaborative arrangements between education and social work staff in assessing the special educational needs of under 5's ?

Probe : What is the nature of the collaboration ?

Is it formal or informal ? By formal collaborative arrangements I mean structured/permanent multi-disciplinary meetings which have a core membership and by informal I refer to non-structured/client multi-disciplinary meetings which do not have a core membership as well as to casual meetings, telephone conversations and correspondence.

If both ask: What are the criteria used for deciding if a particular case will be referred to MDT's ?

Probe : What happens to the 'emergency' cases ?

Probe : What actions does your authority undertake in order to minimize the possibility of having children with special needs who fall through the net ?

Can you describe to me the different types of formal/informal arrangements that you use when you collaborate with education dept. staff in assessing the SEN of under 5's ?

When usually the assessment process is taking place ?

Probe : How old are usually the children when their special educational needs are assessed ?

What are the categories of SEN that result in collaboration between you and education department staff for assessing the child's special educational needs ?

Do you have a set number of collaborative activities that you routinely undertake or is it on a case by case basis ?

If yes, what are these activities ?

Do you usually collaborate with managerial staff or with practitioners?

What are the advantages of formal arrangements ?

What are the disadvantages of formal arrangements ?

What are the advantages of informal arrangements ?

What are the disadvantages of informal arrangements ?

**Are you satisfied with the patterns of collaboration between education and social work department with reference to the assessment of under 5's with special educational needs
If no, have you ever considered to change your collaborative patterns ?**

Do you think that greater contact would help ? If so, in what way ?

Now we will talk about information-sharing

When the education dept staff ask for your advice what kind of information do you offer to them ?

Probe : Do you usually provide them with information only about the child or for his/her family too ?

Do you usually pass on all the information you have about the child and/or his/her family when you have parents consent ?

If not, what kind of information would you not pass and why ?

Now we will talk about your relationship with education dept staff ?

From your own experience is there good communication between social work staff and education department staff involved in the MDT's?

Probe : Do you use similar/dissimilar jargon and terms ? **If not,** does this hinder inter-professional collaboration ?

Can you describe to me your relationship with education department staff ?

Probe : Is it friendly or unfriendly ?

Probe : Is it equal or unequal ? **If unequal,** why is it so? Examples

Ask for good collaborative example and bad example

Do you ever have difficulties or disagreements in your collaborative relationship with education dept staff ? If yes, What are the most common reasons for disagreements ?

Can you give me some examples ?

Probe : How do you think that these problems or difficulties can be minimised or if possible be solved out ?

If they do not mention resource problem ask : Do you think that there is scarcity of resources ?

IF yes ask : Can you give me an example that refers to the scarcity of resources ?

Does the education dept staff admit to you the fact that they do not have the necessary resources ? **Probe:** Are they open to you ?

If you could imagine that you had all the resources you need do you think that you and education dept staff would have an excellent relationship ?

Are you satisfied with the type of relationship between education and social work department staff with reference to the assessment of special educational needs of under 5's ?

IF yes, why ?

IF not, why ?

Now we will talk about training

How much initial training (if any) provided for inter-agency and inter-professional collaboration in the staff of your department ? IF any ask: Do you think that such a joint training course would be useful for your department and why ?

I would like now to discuss suggestions about improving such collaborative activity

What in your opinion makes for effective inter-professional and inter-agency collaboration ?

What changes in the relationship you have with education department staff would you prefer ?

What strategies might be devised to overcome communication difficulties amongst professionals ?

Probe : Are there any other strategies to improve your working relationship ?

APPENDIX 2.6 : Interview design for the semi-structured interviews with education staff : Authority C

The interview design is divided into four sections. Each section includes a short introduction about the topics that will be covered in it.

SECTION A

We will start with your role

What is your role in the assessment of special educational needs of children under 5?

I would now like to understand, from your own perspective the role of the social work staff in the assessment of special educational needs for under 5's, can you please explain to me what his/her role involves?

How clear/unclear do you think the role of the education dept. staff to be in the assessment process?

How clear/unclear do you think the role of the social work staff to be in the assessment process?

In your collaboration with social work department staff in the assessment process are there overlaps in your role ?

Probe :If there is an overlap, do you think that this is useful or not ?

Can you give me an example ?

Do you think that you and the social work staff share similar/dissimilar aims and values in handling cases in the assessment process ?

Probe : Can you give me an example ?

If not, do you believe that these differences hinder such collaborative relationship ? **Probe :** Can you give me an example ?

Ask also : Have long have you worked together ? **If long time ask:** Has your opinion about the value of such collaborative activity changed since you started working within assessing the special educational needs of under 5's ?

Do you think that now that the collaboration between education and social work staff in assessing the SEN of young children is mandatory (Children (Scotland) Act 1995) that there is greater contact between you and the social work staff ?

What, in your opinion, are the advantages of inter-professional collaboration in the assessment of special educational needs for under 5's?

Probe : How has your department benefited by such collaborative activity?

Probe : What are the benefits for you personally ?

What, in your opinion, are the disadvantages of such inter-professional collaboration ?

Probe : What are the costs of such collaborative activity for your department ?

Probe : What are the costs for you personally ?

16) Do you think that there are more benefits or costs ?

Probe : Can you explain to me why ?

SECTION B

How would you describe the type of collaborative arrangements between education and social work staff in assessing the special educational needs of under 5's ?

Probe : What is the nature of the collaboration ?

Is it formal or informal ? By formal collaborative arrangements I mean structured/permanent multi-disciplinary meetings which have a core membership and by informal I refer to non-structured/client multi-disciplinary meetings which do not have a core membership as well as to casual meetings, telephone conversations and correspondence.

Are you satisfied with the patterns of collaboration between education and social work department with reference to the assessment of under 5's with special educational needs

If no, have you ever considered to change your collaborative patterns ?

Probe : Do you think that formal collaborative arrangements would be useful ?

IF YES, In what way it would be useful ?

Probe : What formal arrangements achieve that informal do not ?

Probe : What kind of formal arrangements would help ?

Do you think that greater contact would help ? If so, in what way ?

If social work staff are involved with a child that is going to be assessed, do you always know this ?

IF yes ask : If social work staff are involved with this child how do you know about this ?

IF no, how do you then find out if social work staff are involved with a child ?

If social work staff are involved with this child do you always ask their help and/or advice?

Can you give me an example of a case where you would definitely ask advice from social work staff ?

Can you now give me an example of a case where you would not ask advice from social work staff although you are aware the he/she knows about the child and/or his/her family ?

Do you think that greater contact would help ? If so, in what way ?

Now we will talk about information-sharing

What kind of information do you usually exchange with social work dept. staff ?

Probe : Do you usually pass on all the information you have about the child and/or his/her family ?

If not, what kind of information would you not pass and why ?

Do you have to ask parent's permission for passing on information or not

From your own experience is there good communication between social work staff and education department staff involved in the MDT's?

Do you use similar/dissimilar jargon and terms ? **If not,** does this hinder inter-professional collaboration ?

Can you describe to me your relationship with social work staff ?

Probe : Is it friendly or unfriendly ?

Probe : Is it equal or unequal ? **If unequal**, why is it so?

Probe: Do you ever have difficulties or disagreements in your collaborative relationship with education dept staff ? **If yes**, What are the most common reasons for disagreements ?

In both cases, Can you give me some examples ?

Ask for good collaborative example and bad collaborative example

If they do not mention resource problem ask : Do you think that there is scarcity of resources ?

IF yes ask : Can you give me an example that refers to the scarcity of resources ?

Does the educ dept staff admit to you the fact that they do not have the necessary resources ?

Probe: Are they open to you ?

If you could imagine that you had all the resources you need do you think that you and educ dept staff would have an excellent relationship ?

Are you satisfied with the type of relationship between education and social work department staff with reference to the assessment of special educational needs of under 5's ?

IF yes, why ? , **IF not**, why ?

Now we will talk about training

How much initial training (if any) provided for inter-agency and inter-professional collaboration ?

IF NOT SKIP QUESTION 22-23 and ask : Do you think that a joint training programme with social work staff about inter-agency and inter-professional collaboration it will be useful?

I would like now to discuss suggestions about improving such collaborative activity

What in your opinion makes for effective inter-professional and inter-agency collaboration ?

What changes in the relationship you have with education department staff would you prefer ?

What strategies might be devised to overcome communication difficulties amongst professionals ? Probe :Are there any other strategies to improve your working relationship ?

**APPENDIX 2.6. : Interview design for the semi-structured interviews with social
work staff : Authority C**

The interview design is divided into four sections. Each section includes a short introduction about the topics that will be covered in it.

SECTION A

We will start with your role

What is your role in the assessment of special educational needs of children under 5?

I would now like to understand, from your own perspective the role of the social work staff in the assessment of special educational needs for under 5's, can you please explain to me what his/her role involves?

How clear/unclear do you think the role of the education dept. staff to be in the assessment process?

How clear/unclear do you think the role of the social work staff to be in the assessment process?

In your collaboration with social work department staff in the assessment process are there overlaps in your role ?

**Probe :If there is an overlap, do you think that this is useful or not ?
Can you give me an example ?**

In your collaboration with education department staff in the assessment process are there overlaps in your role ?

Probe : If there is an overlap, do you think that this is useful or not ?

What could you do to help that the education dept staff could not ?

Can you give me an example ?

Do you think that you and the education department staff share similar/dissimilar aims and values in handling cases in the assessment process ?

Probe : Can you give me an example ?

If not, do you believe that these differences hinder such collaborative relationship ? Can you give me an example ?

Ask also : Have long have you worked together ? **If long time ask:** Has your opinion about the value of such collaborative activity changed since you started working with education dept staff in assessing the special educational needs of under 5's ?

Do you think that now that the collaboration between education and social work staff in assessing the SEN of young children is mandatory (Children (Scotland) Act 1995) that there is greater contact between you and the education department staff ?

What, in your opinion, are the advantages of inter-professional collaboration in the assessment of special educational needs for under 5's ?

Probe : How has your department benefited by such collaborative activity?

Probe : What are the benefits for you personally ?

What, in your opinion, are the disadvantages of such inter-professional collaboration?

Probe : What are the drawbacks of such collaborative activity for your department ?

Probe : What are the drawbacks for you personally ?

Do you think that there are more benefits or drawbacks ?

Probe : Can you explain to me why ?

SECTION B

How would you describe the type of collaborative arrangements between education and social work staff in assessing the special educational needs of under 5's ?

Probe : What is the nature of the collaboration ?

Is it formal or informal ? *By formal collaborative arrangements I mean structured/permanent multi-disciplinary meetings which have a core membership and by informal I refer to non-structured/client multi-disciplinary meetings which do not have a core membership as well as to casual meetings, telephone conversations and correspondence.*

Are you satisfied with the patterns of collaboration between education and social work department with reference to the assessment of under 5's with special educational needs

If no, have you ever considered to change your collaborative patterns ?

Probe : Do you think that formal collaborative arrangements would be useful ?

IF YES, In what way it would be useful ?

Probe : What formal arrangements achieve that informal do not ?

Probe : What kind of formal arrangements would help ?

Do you think that greater contact would help ? If so, in what way ?

Now we will talk about information-sharing

When the education dept staff ask for your advice what kind of information do you offer to them ?

Probe : Do you usually provide them with information only about the child or for his/her family too ?

Do you usually pass on all the information you have about the child and/or his/her family when you have parents consent ?

If not, what kind of information would you not pass and why ?

Now we will talk about your relationship with educ. dept staff ?

From your own experience is there good communication between social work staff and education department staff involved in the MDT's?

Probe : Do you use similar/dissimilar jargon and terms ? **If not,** does this hinder inter-professional collaboration ?

Can you describe to me your relationship with education department staff ?

Probe : Is it friendly or unfriendly ?

Probe : Is it equal or unequal ? **If unequal,** why is it so? Examples

Ask for good collaborative example and bad example

Do you ever have difficulties or disagreements in your collaborative relationship with education dept staff ? If yes, What are the most common reasons for disagreements ?

Can you give me some examples ?

Probe : How do you think that these problems or difficulties can be minimised or if possible be solved out ?

If they do not mention resource problem ask : Do you think that there is scarcity of resources ?

IF yes ask : Can you give me an example that refers to the scarcity of resources ?

Does the education dept staff admit to you the fact that they do not have the necessary resources ? **Probe:** Are they open to you ?

If you could imagine that you had all the resources you need do you think that you and education dept staff would have an excellent relationship ?

Are you satisfied with the type of relationship between education and social work department staff with reference to the assessment of special educational needs of under 5's ?

IF yes, why ?

IF not, why ?

Now we will talk about training

How much initial training (if any) provided for inter-agency and inter-professional collaboration in the staff of your department ? IF any ask: Do you think that such a joint training course would be useful for your department and why ?

I would like now to discuss suggestions about improving such collaborative activity

What in your opinion makes for effective inter-professional and inter-agency collaboration ?

What changes in the relationship you have with education department staff would you prefer ?

What strategies might be devised to overcome communication difficulties amongst professionals ?

Probe : Are there any other strategies to improve your working relationship ?

APPENDIX 2.1 : Interview design for the children's case studies : Education staff

In this section we will discuss about an actual case in order to understand better the assessment process

How did you first get involved with the child?

With whom from the social work dept did you collaborate for this particular case ?

At what stage did you start working together with the (social work dept staff) for this child ?

Probe : Do you remember if you contacted him/her first or if he/she made the first contact ?

If such collaborative activity was not mandatory would you ever collaborate with social work staff for this particular case ?

Can you describe to me how your collaborative relationship with (social work dept staff) began to develop ?

How the (social work dept staff) reacted ?

Probe : Was he/she willing to collaborate, reluctant or neutral ?

Can you describe to me all the activities you have undertaken in order to arrive at an assessment of this child's needs ?

Did you have any common collaborative activities ?

If yes, what were these activities ?

Probe : Did you see each other just in MDT's or you had other common activities ?

How often were contacts made between you and (social work dept staff) in assessing the SEN of that particular case ?

How important do you think your role was in the assessment of that particular case ?

How important do you think the role of the (social work dept staff) was in the assessment of that particular case ?

Did you have any difficulties in your collaborative activity with (social work dept staff) ?

If yes, what were the difficulties and how did you resolve them ?

Were you satisfied with the outcomes of the assessment ?

If not, why ?

Who is responsible for assuring that the outcomes are achieved ?

Probe : Is there any monitoring and reviewing process ?

In this section we will discuss about an actual case in order to understand better the assessment process

How did you first get involved with the child?

With whom from the education dept did you collaborate for this particular case ?

At what stage did you start working together with the (education dept staff) for this child ?

Probe : Do you remember if you contacted him/her first or if he/she made the first contact ?

If such collaborative activity was not mandatory would you ever collaborate with (education dept staff) for this particular case ?

Can you describe to me how your collaborative relationship with (education dept staff) began to develop ?

How the (education dept staff) reacted ?

Probe : Was he/she willing to collaborate, reluctant or neutral ?

Can you describe to me all the activities you have undertaken in order to arrive at an assessment of this child's needs ?

Did you have any common collaborative activities ?

If yes, what were these activities ?

Probe : Did you see each other just in MDT's or you had other common activities ?

How often were contacts made between you and (education dept staff) in assessing the SEN of that particular case ?

How important do you think your role was in the assessment of that particular case ?

How important do you think the role of the (education dept staff) was in the assessment of that particular case ?

Did you have any difficulties in your collaborative activity with (education dept staff) If yes, what were the difficulties and how did you resolve them ?

**Were you satisfied with the outcomes of the assessment ?
If not, why ?**

**Who is responsible for assuring that the outcomes are achieved ?
Probe : Is there any monitoring and reviewing process ?**

APPENDIX 2.9. : Interview design for the semi-structured interviews with health and voluntary organisation representatives

We will start with your role

What is your role in the assessment of SEN of children under 5 ?

I would now like to understand, from your own perspective, the role of the education dept staff (*ask both for EPs and nursing teachers*) in the assessment of special educational needs for under 5's, can you please explain to me what their role involves?

I would now like to understand, from your own perspective, the role of the social work staff in the assessment of special educational needs for under 5's, can you please explain to me what their role involves?

What, in your opinion, are the advantages of such inter-professional collaboration ?

What, in your opinion, are the disadvantages of such inter-professional collaboration

How clear/unclear do you think the role of the education dept. staff (EPs, home visiting teachers, teachers and nursing nurses) is in the assessment process?

Probe : Can you give me an example ?

How clear/unclear do you think the role of the social work staff is in the assessment process?

Probe : Can you give me an example ?

How important do you believe that the collaboration between education and social work department staff to be important in assessing the special educational needs of children under 5?

How well do you think education dept. staff (EPs, home visiting teachers and nursing nurses) carry out their role in the assessment process?

How well do you think social work staff carry out its role in the assessment process?

Are you aware of any disagreements between education and social work department staff ?

If yes, what were these disagreements about and how did they manage to resolve them ?

I would like now to discuss about the relationship between education and social work staff
Is there good communication between education and social work staff ?

How would you describe the type of relationship between education and social work staff in assessing the special educational needs of young children ?

Probe : Is it friendly or unfriendly ?

Is it equal or unequal ?

Probe : Can you give me an example ?

Do they appear to collaborate effectively or not ?

Probe : Can you give me an example that illustrates this situation?

I would like now to discuss suggestions about improving such collaborative activity

What in your opinion makes for effective inter-professional and inter-agency collaboration ?

What strategies might be devised to overcome communication difficulties amongst professionals ?

Probe : Are there any other strategies to improve your working relationship ?

APPENDIX 2.9 : Interview design for the parents of the case-study children

When did you start seeing the social work staff ?

When did you start seeing the education department staff ?

What was the role of the educational psychologist in the assessment of special educational needs of your child ? (ask how often see him/her)

How clear/unclear do you think the role of the educational psychologist was in the assessment process?

What was the role of the social work staff in the assessment of special educational needs of your child ? (ask how often see him/her)

How clear/unclear do you think the role of the social work staff was in the assessment process?

Do you believe that the collaboration between education and social work department staff to be important in assessing your child's needs ?

Probe : Do you think that your child's needs are better assessed when education and social work staff work together ?

What, in your opinion, are the advantages of different professionals working together ?

What, in your opinion, are the disadvantages of different professionals working together ?

Have you ever participated in any meeting with education and social work staff ?

How would you describe the type of relationship between education and social work staff in assessing the special educational needs of your own child?

Probe : Is it friendly or unfriendly ?

Is it equal or unequal ?

Do you think that there are any disagreements between education and social work staff in assessing your child?

Do they appear to collaborate effectively ?

Probe : Can you give me an example that illustrates this situation?

Were you satisfied with the outcomes of the assessment ?

If yes, why ?

If not, why ?

STATEMENT ABOUT ANONYMITY AND CONFIDENTIALITY ISSUES OF THE PROJECT

PROJECT TITLE: 'COLLABORATION BETWEEN EDUCATION AND SOCIAL WORK AUTHORITIES IN ASSESSING THE SPECIAL EDUCATIONAL NEEDS OF UNDER 5's'

Overall aim of the Project : The aims of the project are twofold :

First, given that the Children (Scotland) Act 1995 aims to promote inter-professional collaboration between education and social work authorities in the assessment of young children with special educational needs, the research aims to describe the key features of current patterns of collaboration in all Scottish education and social work authorities . To this end I have already carried out a postal survey that revealed a number of interesting similarities and differences in the nature and extent of such collaboration.

Second, the project aims to explore why different forms of collaboration have developed, to assess the advantages and disadvantages of these collaborative arrangements, and to identify factors which encourage and inhibit inter-professional and inter-agency collaboration. In order to achieve this, I have chosen three authorities as case studies.

Assurances that I can give about the security of confidential information collected relating to clients, staff or premises :

The name of the authority and the name of the participants in the study (staff, clients, parents) will not be used either on the interview design or on any other document, notebook or tape used in the project.

Assurances that I can give that clients, staff or premises would be non-identifiable in any published material :

The name of the authority will be kept anonymous as well as the name of the participants in the study (clients, parents, staff). In addition, I will not include a detailed description of the geographical area of the case studies which would enable the authority to be identified.

I confirm that the above details are correct and that I will inform your department if there is any change to the proposal agreed. I also confirm that a copy of the research report will be provided to both Education³²⁸¹ Social Work Department in your authority prior to publication.

Researcher's Name: Nadia Farmakopoulou

Researcher's Signature :

APPENDIX 3 : CHAPTER 9

APPENDIX 3.1. : Broskowski et al's (1982) table of intraorganisational and environmental conditions that inhibit or facilitate interorganisational relationships

Conditions	Inhibitory	Facilitative
Entities involved	Many	Few
Dependence	None Asymmetrical Unilateral	Reciprocal
Prior experience	Negative None	Positive
Goals/domains	Competitive Identical	Complementary
Auspices	Antagonistic Neutral	Supportive
Philosophy/Values	Conflictual Similar	Identical
Complexity	Dissimilar	Similar
Planning/Negotiations	Unilateral	Reciprocal
Implementation	Sudden Sporadic	Gradual
Benefits of the exchange	Unequal	Equal
Units in the exchange	Heterogenous	Standardised
Levels of the exchange	Few Many	Intermediate
Information	Little	Mutual feedback
Frequency	Seldom	Frequent
Rate of change	Placid Turbulent	Intermediate
Distance	Great	Small
Commitment/Formality	Unmanaged	Managed
Amount of the Resources	Abundant Scarce	Intermediate
Control over resources	High	Low
Leadership/style	Insular Orthodox	Exploratory/Innovative
Internal co-ordination	Weak	Strong

Source : Broskowski et al, 1982:207

APPENDIX 3.2. : Reproduction of the Browskowski et al's (1982) table of organisational and enviromental factors that influence collaboration between education and social work authorities in the SEN field

Factors	Inhibitory	Facilitative
Implementation	Sudden or Sporadic	Gradual
Resource amount	Abundant or Scarce	Intermediate
Dependence	None or unilateral	Reciprocal
Benefits of the exchange	Unequal	Equal
Goals/domains	Competitive or identical	Complementary
Information	Little	Mutual feedback
Frequency	Seldom	Frequent
Values and perspectives	Conflictual or Identical	Similar
Structure	Dissimilar	Similar
Network of awareness	None or little	Great
Distance	Great	Small

collaboration

